

AMERICAN JOURNAL OF INSANITY,

FOR OCTOBER, 1845.

ARTICLE I.

A SKETCH OF THE HISTORY, BUILDINGS, AND ORGANIZATION
OF THE PENNSYLVANIA HOSPITAL FOR THE INSANE, EX-
TRACTED PRINCIPALLY FROM THE REPORTS OF THOMAS S.
KIRKBRIDE, M. D., PHYSICIAN TO THE INSTITUTION.

HISTORY.—In the year 1751, a number of the benevo-
lent citizens of Philadelphia were incorporated by an act of
the Provincial Assembly as "The Contributors to the Penn-
sylvania Hospital." Their charter was general in its char-
acter, and provided for "the relief of the sick and the recep-
tion and cure of lunatics."

The distressed condition of the insane of the province,
the entire want of accommodations for their reception, and
the absence of all judicious treatment were pre-eminently
set forth in all the public appeals, and in all the official docu-
ments relative to this new undertaking.

From the first opening of the institution, on the 11th of
February, 1752, an insane department has always consti-
tuted a prominent part of this noble charity, and has claimed
a large share of the attention and benevolent labors of its
distinguished medical officers and managers.

For a long period of years, it was far in advance of all
other receptacles of the insane in the United States; and
having the advantage of physicians like Bond, Shippen,
Rush, Wistar, Physick and others, of equal celebrity; its
wards for this description of patients were constantly filled,

and its advantages eagerly sought by patients from the most distant sections of the Union.

From private contributions and legacies this institution has always mainly relied, for its support and for the means of extending its usefulness. Principally from these sources, and from a judicious care of its funds, by its early boards of managers, have arisen the noble buildings, which occupy the square between Spruce and Pine and 8th and 9th sts., in the city of Philadelphia, now used only for medical, surgical and obstetric patients; and those more recently erected, two miles from Philadelphia, devoted entirely to the Insane, and which will be described in detail in the following pages.

The insane were received and treated in the Hospital in the city of Philadelphia till the spring of 1841, and up to that period four thousand three hundred and sixty-six had received the benefits of its care. Of this number, one thousand four hundred and ninety-three were restored to their families perfectly cured; nine hundred and thirteen were discharged improved; nine hundred and ninety-five were removed by their friends without material improvement; two hundred and fifty-six eloped, principally before the square in the city was permanently enclosed; six hundred and ten died; and one hundred and ten were transferred to the new "Pennsylvania Hospital for the Insane."

Although all practicable means had been employed for the comfort and restoration of the insane patients, it became evident long since, that great disadvantages were necessarily attendant upon a city location—in connection with a sick hospital, and without a distinct medical organization. These circumstances had for several years induced the Board of Managers to look forward to a removal of this class of patients from the old building, as soon as sufficient funds could be procured for the construction and endowment of a new Hospital.

For this purpose, the resources of the Hospital were husbanded with great care, and the wise foresight of its early managers, in securing the then vacant lots immediately

around the old Institution, ultimately enabled their successors to effect this long cherished object in the most liberal manner.

Several of the lots just adverted to, were purchased at different periods for the sum of eight thousand nine hundred and twenty-seven dollars and twenty-seven cents, and were directed to be sold by the contributors, at special meetings in the years 1832 and 1835. The proceeds of these sales were specially appropriated to the purchase of grounds and the erection of a Hospital for the Insane, and the amount of purchase money and interest received therefrom amounted to about three hundred and twenty-five thousand dollars—with which sum the various improvements, now known as 'THE PENNSYLVANIA HOSPITAL FOR THE INSANE,' have been completed.

The corner stone of the new building was laid on the 22d of June, 1836. It is located on a fine farm of 111 acres, about two miles west of the city of Philadelphia, between the Westchester and Haverford roads, on the latter of which is the gate of entrance. The building was nearly completed by the fall of 1840, when Dr. Thos. S. Kirkbride, who continues to direct its operations, received the appointment of Physician to the Institution. Under his superintendence, its organization and arrangements were completed, and the building opened for the reception of patients on the 1st day of the year 1841.

BUILDINGS.—The centre buildings and main wings of the new Hospital present an eastern front of four hundred and thirty-six feet, and consist of a basement and two principal stories. The basement throughout is surrounded by an area seven feet wide at the bottom, and six feet below the surrounding ground, to which handsomely sodded sloping banks gradually ascend. The area is paved with brick, and at its outer edge is surrounded by permanent gutters, connecting with large culverts.

The centre building is ninety-six feet deep—sixty-three feet wide, east of its junction with the wings—and sixty-

seven on its western side. The former, which is the principal front, is built of cut stone and ornamented with a handsome doric portico; the western has also a portico of smaller dimensions, and like the rest of the Hospital is of stone, stuccoed to resemble the eastern front.

Spacious arched halls cross this building at right angles in each of the stories; those passing north and south are twelve feet wide and continuous with the corridors of the wings; the others are fourteen feet wide and contain the stairways, which in the principal stories are six feet wide, and like *all* the stairways leading from the upper story, are, with the exception of the stepping board and hand-rail, constructed entirely of iron and firmly secured to the wall.

In the basement is the kitchen, thirty-six by twenty-two feet, in which are fixtures of approved construction for steaming, baking, &c.,—store-rooms, a family dining room, a similar one for the domestics, and a room for furnaces and the storage of fuel. The kitchen and passage ways are laid with flag-stone embedded in mortar, and under the centre building is a commodious cellar.

In the principal story is the managers' room, (which is also the steward's office,) a family parlour, each twenty-four by nineteen feet, and two large rooms thirty-six by twenty feet, used as reception rooms for visitors, and for collecting the patients on the Sabbath, or on other occasions.

Communicating with the corridors of the wings and with the hall of the centre, are rooms, in which patients can have a private interview with their friends, without exposure, either to other patients or to visitors to the house.

In the second story are the Physician's office,—in which are kept the medicine and the library,—chambers for the officers resident in the Hospital, and two parlors, similar in size to the large rooms on the first floor, handsomely furnished and intended for the better class of convalescent patients.

The centre building is surmounted by a dome of good proportions, in which are placed the iron tanks, from which water is conveyed to every part of the building. The sum-

mit of the dome is eighty-five feet above the level of the basement, and from it, the panoramic view is one of great beauty; embracing a large extent of country—several flourishing villages—distant views of the Delaware and Schuylkill rivers, with their shipping—the Girard College, and the city of Philadelphia, with many of its more prominent objects.

The main Hospital is covered throughout with zinc or copper, and all its cornices, window sills, &c., are of cut stone, similar to that used for the front of the centre building. The basement *story* of the centre, and *all* the stories of the wings are thirteen feet six inches high; the two principal stories in the centre are eighteen feet nine inches.

Passing north and south from the centre building are the *main wings*; the north is occupied by the male, and the south by the female patients, and they do not differ materially in their structure or arrangements. On the west side of the basement is a passage-way ten feet wide, and laid in cement; opposite to this in each wing, is a dining room forty-two by twenty-four feet—another twenty-four feet square, lodging rooms for the domestics of the establishment, and rooms for the bath-boilers, for warm-air furnaces, and for the storage of fuel. There is also in the basement a bake house, ironing room, &c.

The principal story consists of a corridor twelve feet wide, with the patients' chambers on each side of it; these rooms are thirty in number, eight by ten feet, and are eleven feet high to the springing line, and twelve and a half feet to the crown of the arch. In each chamber is a glazed window, five feet by three and a half, and over each door is an unglazed iron sash, sixteen by thirty-two inches; by means of which a free circulation of light and air is at all times permitted. At the end of the corridor adjoining the centre building is a private stairway, and at the other, is a parlor twenty-nine by twenty-five feet, having by its side one of the main stairways leading to the upper story. The doors at this end of the hall lead to one of the private yards.

There are also, store rooms for the patients' clothing, and a room containing the funnel by which soiled clothes, bedding, &c., are conveyed from both stories to the basement.

Running to the west and at right angles to those just described, are the *return wings*, having a corridor ten feet wide, on one side of which are eight chambers, similar to those already mentioned; opposite to these are three rooms each seventeen by thirteen and a half feet, intended for patients who wish superior accommodations, or who have private attendants,—a wash room, water closet, and a bath room, in which is every convenience for the douche, hot, cold, and shower baths. The patients occupying these different divisions, are separated by large folding doors, which can be thrown open at pleasure.

The upper story is similar in its arrangements and fixtures to that just described, except that the main wing is divided, and that the patients occupying one section of it, are intended to have access to the large parlor in the centre building, and pass to the basement by the private stairway.

The basement and passages of the centre building and every part of the wings, except the parlors and some of the lodging rooms below, are arched throughout.

Cast iron window sash, having glass six by fifteen inches, is used in all the patients' chambers, and by its peculiar arrangement, this hospital presents neither bars nor the extra sash which is almost universally met with. The upper and lower sash work in an iron frame, in which they are so exactly balanced, that no difficulty is experienced in moving them. They rise and fall simultaneously to the extent of six inches, when a *stop* prevents their further progress.—Space is thus given for ventilation without the risk of an escape.

Large glass, and wooden sash are used in all the parlors; in those in the wing, a slight wire screen, similar to that frequently seen in private dwellings, is placed on the outside of the lower sash; in those in the centre, ornamental cast iron screens are employed—both being intended to prevent acci-

dents from sudden impulse, and neither offering anything unsightly either on the inside or outside of the building.

Most of the corridors have a handsome carpet, six feet wide, in their whole extent—improving their appearance, and contributing materially to the quiet of the house, by diminishing the sound made by their being used as a promenade during the day—and enabling those who are passing at night, to do so, without disturbing the patients who have retired. The parlors are generally carpeted and neatly furnished; every chamber where the state of the patient will permit it, has a bedstead, straw and hair matrass, table, chair, looking glass, and strip of carpet; and when desired by the friends of patients, still more furniture may be introduced.

Of the bedsteads now in the house, about fifty are of cast iron, neatly made and painted, and so constructed that they can be firmly secured to the floor, and that vermin cannot possibly be harbored in them; the remainder are of wood, and differ in no respect from what are commonly found in boarding houses.

Thirty-one feet, north and south of the main hospital, and nearly on a line with the eastern front of its centre, are placed the *detached buildings*, or *lodges*—one for each sex—which were authorised to be built by the contributors in 1841. They are also of stone, one story high, and built on three sides of a hollow square; the fourth being finished with piers and an open iron railing, giving free access to the air, and a handsome view of the deer park or surrounding scenery. These buildings are ninety-five feet on the west, and seventy-three on the other two sides—have their cellars arched, and a slate roof. Each building contains rooms for the accommodation of eighteen or twenty patients and their attendants,—a complete apparatus for bathing, water closet, &c.

These rooms are arranged specially for the accommodation of noisy and violent patients; they are placed on the outer side of the building, looking into a passage way eight

feet wide, and finely lighted by numerous windows opening on the court yard, which is surrounded by a brick pavement, ten feet wide, enclosing a grass plot in its centre.

At the back of each room, near the ceiling, which is eleven feet high, is a glazed window three feet two inches, by eight inches, controlled by a cord which passes over pulleys into the hall. On the inner side of each room, in addition to the door, is a cast iron sash, twenty by thirty-seven inches, which may be glazed, or in front of which may be slid a close, wire, or glazed shutter, according to circumstances.

In each of these buildings, three distinct classes of patients can be accommodated; and from their position and structure, the most noisy will offer no annoyance to the inmates of the main hospital, while their accommodations will be scarcely less comfortable.

These lodges have proved an admirable part of the hospital, they are so near the main building as in no way to diminish the facility of supervision, and yet being entirely disconnected with it, they answer the objects of their erection much better, than any apartments in the main structure could possibly do. Every years experience has gone to confirm, the great value of this species of detached building, with attendants always in them, for certain classes of patients, and to prove that the objections occasionally made, do not exist in practice.

All these buildings have been constructed of the best materials, and in the most substantial and durable manner, and as will have been observed from the description are almost perfectly fire proof.

The *Workshop*, is a handsome frame building twenty by forty feet, two stories high, and situated near the gateway. The lower story is intended for carpenter work, turning, basket making, &c.—the upper room is plastered, and may be used for mattress making, and other pursuits requiring space or for some of the amusements of the patients.

The buildings which were on the farm at the time of its purchase, (in addition to the residence of the Physician

within the enclosure) consist of a comfortable house for the farmer, an adjoining one for the gardener, a spring-house, an ice-house, coach-house, barn, &c., outside of the wall, and near the public entrance.

HEATING APPARATUS.—The hospital buildings are warmed by thirty-four air furnaces, burning anthracite coal, and supplied with air to be heated, through openings on the outside of the building. Of these furnaces, twenty-six are placed in the basement story of the main hospital, and four in the cellar of each detached building. By these means, during the severest weather, a regular and pleasant temperature has been given to all the parlors, halls, and chambers, occupied by the patients and their attendants, in every part of the establishment.

By large openings, with valves which regulate the supply, the heated air is freely admitted into all the parlors and corridors; and between the latter and the chambers, there is a free communication by means of the unglazed transom sash over each door, and if desired, during the day, by the doors themselves.

In addition to this, there is provision for giving a further supply of heat to each chamber; on the first floor, from the stone covering the warm air flue, which is about twenty inches wide, and passes along the inner side of each room; and in the second story, by the admission of the heated air through a valve, opening into the room, and out of reach of the patients.

In the Lodges, the warm air is admitted into the passages in a similar manner, and into every room by valves, out of reach of the patients, and controlled from the hall.

VENTILATION.—Near the top of each chamber in the main building, is an opening six inches in diameter, from which a flue passes to the attic, and communicates with the external air, by means of numerous openings in the roof. The arrangement of the chamber windows gives for each when open, a free space, twelve by thirty-four inches, and the current of air is carried across the building, through the door-

ways and the open sash above them. The corridors have either large doors or windows at their terminations, and by opening these, the whole of the wing is thoroughly ventilated in a very short period.

In the detached buildings, each room has one or more openings in the ceiling, six inches square, which communicate with the attic, and thence with the external atmosphere; they are opened and closed by means of a cord which passes over pulleys into the passage.

At each end of each division, (four in all) of this passage way, is an opening similar in design and arrangement. All the ventilators and hot air valves are so constructed, that their position is known at a glance, without entering the patients' rooms.

Fourteen windows, three feet six inches, by four feet nine inches, opening on the courtyard, with the ventilation windows outside, and the door, and iron sash within, give a free ventilation across the building. In addition to the ordinary tight door, there is an open iron one neatly made and painted, at each outer termination of the passage way, by means of which a free current of air is allowed to pass whenever desirable—and the patients restricted to the halls during the summer, are thus given a fine view of the surrounding scenery.

SUPPLY OF WATER.—Near the southeast angle of the hospital property, and more than seven hundred feet from the centre building, is a one story stone structure, sixty-one by twenty-five feet, in which is the pump, driven by horse power, by means of which water is forced into the iron reservoirs in the dome of the centre building. Two horses are able to raise nearly fifteen hundred gallons per hour, through eight hundred and forty-five feet of pipe, to an elevation of one hundred and six feet.

This water is derived from a number of springs which arise on the premises, and empty into a pond one hundred and ninety-five by forty-five feet, and of an average depth of about four feet. From this pond, the water is conveyed

by an iron pipe into the large cistern with which the pump communicates. In addition to this source of supply, a small stream passing through the grounds, can at any time be turned into the cistern should circumstances render it necessary. The reservoirs in the dome contain about six thousand gallons, and two small tanks in the return wings, contain about five hundred gallons each, and from them the water is conveyed to every section of the buildings for bathing and other purposes. The average daily consumption is near three thousand gallons.

In the building just described, are all the fixtures for washing and drying clothes, by means of which an abundance of unpleasant effluvium is kept out of the Hospital. Soiled articles are thrown down the *funnels* in the different wards, and are regularly taken from the receiving rooms in the basement to the wash-house, from which they are returned when ready for the ironing-room. The location of this building, and of the ample drying grounds attached to it, is such, that they can scarce be seen from the Hospital.

DRAINAGE.—The Hospital stands upon a high part of the farm, and has a descent from it in every direction. Commencing at the western side of the centre building, is the main culvert, which empties outside of the wall into a small stream of water, forty-five feet below the elevation on which the building stands, and more than three hundred and fifty feet from it. Into this *main*, empty the *branch* culverts, which lead from the western terminations of the return wings, each being about one hundred and seventy-six feet long.

The culverts which drain the yards, the roofs, and all the washings, of the *detached buildings*, commence under the bath-rooms, join the *branch* culverts near the commencement, and are each about two hundred and seventy feet long.

All the openings into these various culverts are secured by the most approved apparatus for preventing the escape of effluvium, and the culverts themselves are sufficiently large to allow a man to pass through their whole extent.

PLEASURE GROUND AND FARM.—Of the one hundred and eleven acres in the farm, about forty-one around the Hospital are specially appropriated as a vegetable garden and the pleasure ground of the patients, and are surrounded by a substantial stone-wall. This wall is five thousand four hundred and eighty three feet long, and is ten and a half feet high.

Owing to the favorable character of the ground, the wall has been so placed that it can be seen but in a very small part of its extent, from any one position; and the enclosure is so large, that its presence exerts no unpleasant influence upon those within. Although it is probably sufficient to prevent the escape of a large proportion of the patients, that is a matter of small moment, in comparison with the quiet and privacy which it at all times affords, and the facility with which the patients are enabled to engage in labor, to take exercise, or to enjoy the active scenes which are passing around them, without fear of annoyance from the gaze of idle curiosity or the remarks of unfeeling strangers. Our location gives us the many advantages afforded by a thickly settled district, and proximity to a large city, and the wall obviates most of its disadvantages. Immense utility has been found to result from having such *large pleasure grounds, enclosed, and by a wall so admirably located, and not the slightest objection of any kind.*

Immediately in front of the Hospital, is a lawn forming a segment of a circle, in which is a circular rail-road and extensive flower borders. To the east of this, and passing into the woods, is the *deer-park*, surrounded by a high pallisade, and forming an effectual and not unsightly division of the ground appropriated to the different sexes; from various points of which, and from the whole eastern front of the building, it is seen to much advantage.

The pleasure ground is beautifully undulating, interspersed with clumps and groves of fine forest trees, and from every division of it, as well as from every room in the main Hospital, is a handsome view; either of the surrounding country and villages, the rivers in the distance, or the public roads in its immediate vicinity.

The groves are fitted up with seats, and ornamental summer houses, and are the favorite resort of the patients, during the warm weather. That on the west, from the position of the wall, does not appear to be inclosed, and offers full view of two public roads, of the farm and meadow, a mill race, a fine stream of running water, and two large manufactories. The grove on the east is not less pleasant, and the views from it are equally animated. This last surrounds the pond, in which is found a variety of fish.

On the north and south side of the building are private yards, one hundred and seventeen feet wide, and extending two hundred feet from the return wings which form one of their sides. These yards are enclosed by a tight board fence seven and a half feet high, and are surrounded with a brick pavement, which affords a fine promenade at all seasons.

The fences around these yards, like the wall itself, have been constructed, not so much to confine the patients, as for the sake of privacy, and to protect them from the gaze of visitors.

The remaining seventy acres, outside the wall, are cultivated by the farmer, and, with the grass obtained within it, furnish pasture and hay for the large dairy, which supplies both Hospitals with cream and milk during the whole year. From this source are also obtained some grain, and all the potatoes and other vegetables that are required in large quantities. Ample opportunities for agricultural labor are thus afforded for all patients, for whom it may be deemed beneficial.

ORGANIZATION.—The government of the Pennsylvania Hospital is vested in a Board of twelve Managers, who give their services gratuitously, and who are elected annually by the Contributors.

To this Board is entrusted the general management of the Institution and its funds—the regulation of its domestic economy—the admission and discharge of patients, and the

election of Physicians and other officers. In addition to their duties in the city, the attending Managers pay one official visit, weekly, to the Hospital for the Insane, to inspect the accounts, to examine the house and grounds, and to see that the patients receive the proper care and attention.

The Officers of the Hospital for the Insane, are

1. *A Physician*, who resides upon the premises, to whom is confided the general superintendence of the establishment—the sole direction of the medical, moral and dietetic treatment of the patients, and the selection or approval of all persons employed in their care.

2. *An Assistant Physician*, living in the Hospital, who prepares and dispenses all medicine prescribed for the patients—devotes himself to their care—sees that all directions respecting them are faithfully carried out, and that the attendants, and others employed in the wards, fail not in the performance of their duties.

3. *A Steward*, who takes care that the buildings and grounds are kept in good order—makes all the purchases for the house—receives all monies due the Institution for board, &c.—makes engagements with those employed—pays them for their services, and settles all accounts against the Hospital.

4. *A Matron*, who has the general charge of the domestic economy of the house—the cooking and distribution of the food, and of the female domestics, and attends specially to the comfort of the female patients.

In the wings, the following persons are employed :

1. *Supervisors*, one for each sex, whose duty it is to pass their time among the patients in the different wards and pleasure grounds—to endeavor to interest, employ and amuse them in every way in their power, and to see that all the rules for the attendants in their intercourse with the patients, are rigorously observed. Before retiring at night, the Supervisors furnish the Physician with a written report of whatever has come under their observation during the day.

2. *Attendants*, who have the immediate care of the patients—sleep in the same divisions of the house—attend them in the dining rooms—accompany them in their walks, rides, or amusements—assist them when engaged in manual labor, and take the entire charge of the halls, chambers, and clothing of the patients, as may be directed by the Physician.

The buildings of this Hospital admit of six distinct wards in each wing, making as many complete classes of patients for each sex. To each ward is assigned two attendants—so that at all times there is one attendant in the presence of the patients, and one who may be walking or riding with them under his care, or performing other duties that may necessarily take him out of his appropriate division. The only exception to this rule is in the two wards of each lodge, where three attendants are found sufficient to keep up the supervision and perform all other duties—two being generally out of doors with a majority of the patients, and the other having the care of those who remain in the wards.

The number of attendants employed, is generally one for every 7 or 8 patients, exclusive of special attendants, the number of whom varies at different times from 2 or 3 to more than double those numbers.

3. *A Watchman*, who attends to the safety of the building on account of fire—visits every part occupied by the male patients, frequently during the night—attends to the administration of medicine when required—starts the kitchen fires and rings the bell in the morning—sees that all rules are faithfully observed, and before retiring to rest, makes a written report to the Physician, of his observations during the night. At 6 A. M. his duties as Watchman cease for the day.

4. *A Watch-woman*, who is governed by the same rules as the watchman, and whose duties are similar, except that her time is spent entirely in the wards occupied by the female patients.

In addition to those just mentioned, whose duties bring them directly in contact with the patients, there are employed in the Hospital and resident there—a gate-keeper—a coachman—a jobber—a baker—a fireman—one cook—one assistant cook—three attendants in dining rooms—two chambermaids, and four washerwomen. The farmer and gardener reside outside of the enclosure.

TREATMENT. The *medical* treatment of patients in this institution, is varied of course, according to the peculiar symptoms, presented by each case, and a detail of which would be out of place in a notice like the present. Baths, for which ample provision is made in the different wards, are used very extensively, and all the means of moral treatment in its varied ramifications, are constantly resorted to, for the benefit of the patients. Out door labor in the garden—on the grounds, or farm—mechanical employments of different kinds—riding in the circular railway—ten pins—carriage riding, or long walks to the many objects of interest in and about the city of Philadelphia;—the use of musical instruments—attendance at parties, lectures and concerts—all the usual variety of games—a library of near 1000 volumes, and a great variety of periodicals, are some of the many means which come under this category.

During fine weather at all seasons of the year, the arrangements of this establishment enable a very large part of all the patients to take active exercise, and to spend a large portion of the entire day in the open air.

Those patients who are well enough, attend divine worship in some of the churches in the vicinity, and nearly all attend the reading of the Bible, on the evening of every Sabbath.

RESTRAINT. Restraining apparatus has very rarely been used in this establishment, and the seclusion of patients to their chambers, is resorted to as little as possible. Several months have frequently elapsed without any form of apparatus being employed, and very often out of from 150 to 170

patients, many days elapse without a single one being confined to their room, even for a single hour.

No restraint is ever employed without the express direction of the physician—no apparatus is ever kept in the wards, and the only form ever used, are the invaluable apparatus for retaining certain classes of patients on their beds at night—the leather mittens and wristbands or some still simpler substitute for the latter. Although cases requiring even these means of restraint are not numerous, still the experience of this institution thus far has been, that they may occasionally be employed with advantage to a patient. Special pains are taken to avoid *long continued seclusion*, the bad effects of which among the insane, are believed often to be still greater than what arise from mechanical means of restraint.

ADMISSION OF PATIENTS.—All classes of insane persons, without regard to the duration of the disease or of its curability, are admitted into this institution, upon securing the payment of a reasonable rate of board, by the obligation of some responsible resident of the city or county of Philadelphia. Cases of *Mania a Potu* are never received into this hospital—but that in the city, exclusively.

In addition to those patients who pay for their board, a limited number from the State of Pennsylvania is received on the free list, and supported by the Institution without charge of any kind. The number thus admitted is regulated by the income of the Corporation, and of this class there is generally from one hundred and twenty to one hundred and fifty under care, in the two Hospitals, of whom about one fourth are insane.

In order to extend as widely as possible the benefits of this charity, it has been deemed advisable to restrict the admission of insane persons on this list, to recent cases and but for a limited period; so that if no indications of recovery are seen after a reasonable trial, they may be discharged to make room for other applicants. If improving when

their term is ended, they are generally continued till their restoration is complete.

No person about the Hospital, except the officers, knows who are free patients, and there is no distinction made in their accommodations, but what the character of their disease, or their previous pursuits have rendered necessary.

THE PENNSYLVANIA HOSPITAL FOR THE INSANE, as has been before observed, was opened for the admission of patients on the 1st day of January, 1841, and 93 patients, in a short period, were removed from the Hospital in the city to the new location. A few followed after the completion of the lodges. Of them, nearly all were incurable, and had been residents of the old Institution for various periods from 3 to 40 years. Exclusive of these, the following table shows the number of patients admitted, and the average number and the highest number under care each year since the opening of the Hospital.

| | 1841 | 1842 | 1843 | 1844 |
|---------------------|------|------|------|------|
| 1st. Admissions, | 83 | 111 | 140 | 153 |
| 2d. Average number, | 104 | 114 | 132 | 151 |
| 3d. Highest number, | 116 | 127 | 145 | 163 |
| 4th. Total number, | 176 | 238 | 258 | 285 |

The number of admissions for the present year, up to this date, (August 1st.) has been 102, and the highest number in the house at one time has been 171. The wing devoted to males has been crowded for two months past, owing mainly however to the unusual preponderance of male patients, during the present summer, as the whole building when completely filled is capable of accommodating 180 patients with their attendants.

AUGUST 1st, 1845.

ARTICLE II.

RELIGIOUS SERVICES IN LUNATIC ASYLUMS—DUTIES OF
THE CHAPLAIN.

At most of the Lunatic Asylums of this country and of Europe, religious services are held every Sunday, which the patients attend. Some have Chaplains who devote much time to the institution with which they are connected. Chaplains have been appointed to all the County Asylums in England, and at the Hanwell, the Surrey, and some other Asylums, the communion is administered to those patients who wish it, and are considered in a proper state to receive it.

But Chaplains to Lunatic Asylums are not of modern origin. In 1677 there was a Chaplain at the Bethlem Lunatic Hospital, London, whose duty it was "to visit the lunatics and to instruct and pray with such of them as are capable of it." He was also "desired to compose and make such forms of prayers as he shall conceive most fitting for said Lunatics." The philanthropist Howard alludes to the advantages of a Chapel at Bethlem and St. Luke's for the patients, and mentions having seen similar arrangements for the religious instruction of the insane in the Hospitals of other countries.

More than twenty years since, religious services were held in the Glasgow Lunatic Asylum, and a Chaplain was attached to the Nottingham Asylum so early as 1825. Occasional religious services were held at the Lunatic Hospital in New York so early as 1819. On the continent of Europe, in most of the Lunatic Hospitals, religious services are regularly performed. Some Institutions for the Insane have two Chaplains, one Roman Catholic and one Protestant. This is the case at the Institution for the Insane at

Siegburg, under the superintendence of the celebrated Jacobi, who, in his work on Hospitals for the Insane, thus alludes to the religious services of the Hospital, and the duties of the Chaplain:

"On Sunday, as well as on all other days appointed by the ordinances of their respective churches for religious service, worship is conducted in the forenoon by the respective clergymen of the Roman Catholic and Reformed faith. The former commences at half past nine. A. M. and the latter at 10, A. M., throughout the year.

"The respective services are to be conducted according to the existing rules and regulations of each profession; yet it is requisite that the ceremonial part be simplified and abridged as much as possible; that a prominent place be given to the singing; that the sermon be of a plain and simple character, and that the time be limited to half an hour at the most. The more particular points in reference to these peculiarities may be determined by the Director, in conjunction with the clergymen.

"Service is likewise performed in the afternoons of Sundays and holidays; though on these occasions it is principally confined to the reading of the prayers and lessons for the day, and the time is also limited to half an hour.

"It is only to those patients whose minds enjoy a certain degree of health, either continuously or at intervals, or such as are approaching recovery, or are already in a state of convalescence, that the more spiritual duties of the clergymen can be exercised.

"In the case of such, these duties are of supreme importance; in order that in the first instance alluded to, the patient, in the bright moments of a transient respite from the thralldom of his malady, may again be enabled, though but for a moment, to hear the voice of Divine Truth; for though no disposition may be thus aroused which would eventually conquer his disease, yet, comfort and tranquility may at least be imparted at a time, when by looking back into the depths of the misery he has for a while escaped, he might

be ready to yield himself to despondency or despair. As to those who are approaching recovery, and about to be restored to the blessings of social intercourse, it is necessary, if possible, to awaken or re-establish in them a genuine religious frame of mind; and especially in those frequent cases, where the mental derangement is the consequence of great moral deviation or transgression, to assist in bringing them to a clear perception of their inward state; to lay hold on religion as their only safeguard, and to love it as the surest means of defence against the recurrence of their afflictive malady.

"Beside the patients and convalescents, the attendants and the whole body of assistants in the establishment, afford the clergymen a wide field of religious labor, deserving of their utmost attention.

"The relative position in which the attendants are placed with regard to the patients, has a close and important bearing on the fulfilment of the objects of the establishment; for the various qualifications which are required of them, as mildness, kindness, patience, firmness, fidelity, &c., are so extensive, and the duties which they have to perform are so arduous, and difficult, that it is not possible they can even approximate to the fulfilment of them, unless strength and ability for their performance be constantly derived and renewed from the fountain of true religion.

"To promote this state of mind on the part of the attendants, and that it may be continually gaining ground and producing its natural and important results, must, therefore, steadily engage the attention of the clergyman; and indeed it is an object to which he can scarcely devote too much anxiety and zeal. Still it is not to the attendants alone, that the clergyman must confine his endeavors to stimulate by a constantly renewed encouragement, to the affectionate, faithful and unwavering discharge of their duties; but the whole body of the officers and assistants, whose occupations are alike difficult and trying, must also share the benefit of his devoted exertions. He must indeed be aware how impor-

tant is the station they occupy, when he considers how much depends on their harmonious co-operation, and how arduous are the exertions required of them, to render the Asylum, as it were, a city of refuge from the greatest of human woes ; how constant an opposition they must maintain against the outbreaks of rudeness, cruelty, obduracy, avarice, and every propensity that can degrade the human heart ; and finally, that this high object has to be obtained, and the utmost mildness and forbearance to be extensively diffused, even amidst the coercion, severe restrictions, and painful privations, which are inseparable from the treatment of this species of disease."

On the participation of the clergymen in the moral direction and treatment of the patients, he thus remarks :

"Since the clergymen, devoted as they are exclusively to the service of the institution, would not be fully occupied by those employments alone, which are connected with their spiritual office, they have also allotted to them a certain participation in the treatment of the patients. There are some cases which afford but a partial and transitory scope for the exercise of the duties of the clergyman, and others which do not admit of any religious alleviation whatever ; yet, even in these cases, the clergyman is enabled by his peculiar vocation, to render very efficient and valuable assistance to the curative means employed by the physician ; though this can only be effected in subordination to the medical treatment already determined on in each particular case.

"When, however, agreeably to these conditions, the occasion arises of investigating the developement and course of the mental aberrations ; of exciting or removing certain frames of mind ; of excluding or facilitating the introduction of particular classes of ideas ; of exciting, superintending, and guiding the operations of the understanding ; then will the clergymen find that peculiar province for the exercise of his abilities, for which his position and pursuits have qualified him. The intercourse of the clergy with the pa-

tients, is of the most agreeable description ; for with the exercise of coercion and force they have nothing to do, but, on the contrary, they can afford them many alleviations of suffering, shew them many tokens of kind regard, and may procure for them many little comforts in their constant and daily association with them. Secure also in the esteem which attaches to their official character, they mingle with the patients at all periods of the day, during their labors, their walks, their recreations, and their meals ; and many are the opportunities thus presented, of discerning the more secret workings of their minds, and of gaining the most effectual influence over them. But, in order to render this intercourse with the patients as valuable as possible, they must avail themselves of those studies to which their peculiar vocation in some degree opens the way ; *they must make themselves familiar with those writings which unfold all that experience has taught, and is still teaching, of the various morbid states of the mind, in order to enable them to penetrate the more profoundly into all the labarynths of mental aberration, and to become the most effective and valuable coadjutors of the physician, in the medical treatment of his patients.* The medical director of the establishment will point out to them those works, the study of which is most calculated for the attainment of this end."

In England, religious exercises are held in most of the Lunatic Asylums. On this subject the *Metropolitan Commissioners in Lunacy*, in their late Report to Parliament, say :

"In respect to Devotional Exercises, and Religious Instruction, we have the satisfaction of reporting that proper attention appears to be very generally paid by the Proprietors and Superintendents of Asylums to these important duties ; that the service of the church is, for the most part regularly performed every Sunday ; and that prayers are in many cases, read on other days of the week, where there are patients in a condition to be benefited by them. We may state also, as the result of our inquiries, that the effect is tran-

quilizing, and productive of good order and decorum, in a remarkable degree, and in some instances permanently beneficial.

"The patients are said frequently to look forward to the service with pleasure, and to consider exclusion from it as a privation. Considering religious exercises in Lunatic Asylums merely as medical aids, and conducive to good order, they are of most important use. So long, at least, as the service lasts, they occupy the patient's mind, and set before him an example of quiet and decorum. The prayers of the church are eminently calculated to produce a soothing influence upon even the insane hearer. Instances of misconduct are said to be very rare, and when they do occur, they seem to produce much less effect upon the other persons present than they would do upon persons not accustomed, as the inmates of a Lunatic Asylum are, to scenes of noise and confusion and to the occurrence of epileptic fits, or maniacal paroxysms, from day to day.

"In the opinion above expressed as to the tranquilizing effect of religious exercises the medical officers and Superintendents of Asylums, with whom we have conversed, are, almost without exception, agreed; they differ however somewhat, in their views with respect to any permanent or lasting benefit being produced thereby upon the minds of the patients. The experience and observation of many Superintendents have led them to the conclusion that the temporary effect ceases with its cause, and that after the conclusion of the service little or no trace is left of its soothing influence. They all concur in saying that religious instruction injudiciously imparted, and controversial discourses, are positively injurious."

In the United States there appears to be a general impression that religious services in Lunatic Asylums tend to promote the comfort and welfare of patients. Hence most if not all have such services on Sunday.

We are of the opinion that every Asylum should make provision for religious worship; and that where there are

one hundred patients to assemble, a Chapel should be erected or a large and convenient room should be set apart exclusively for this purpose. It should be fitted up with a pulpit, a convenient place for the singers, and comfortable and well arranged seats for all, and be made to resemble a place for religious worship, that devotional feelings may be induced and encouraged.

The selection of a Chaplain to a Lunatic Asylum requires caution. Many clergymen of good abilities, who may be acceptable to other congregations, are unfitted to discharge in the best manner the duties of a religious Teacher to an assembly of persons made up of those whose minds and bodies are disordered, enfeebled, and excitable. Some are too austere, denunciatory, and prone to dwell on the "terrors of the law," rarely preaching in a way calculated to console and encourage those who hear them. Affected or eccentric manners—a very loud voice—a boisterous way of preaching—with violent gesticulations, are objectionable in a Chaplain to such an Institution.

Cowper, (himself for a long time insane,) has described a preacher suitable for such a station.

—————" Simple, grave, sincere ;
In doctrine uncorrupt ; in language plain,
And plain in manner ; decent, solemn, chaste,
And natural in gesture ; much impress'd
Himself, as conscious of his awful charge,
And anxious mainly that the flock he feeds
May feel it too ; affectionate in look,
And tender in address, as well becomes
A messenger of grace to guilty men."

In addition to good sense and great discretion, his mind should be enlarged and liberalized by travel and a knowledge of men and books.

He should be a man of true and uniform piety, of enlarged and genuine benevolence—not that benevolence which is awakened into activity chiefly by the sufferings of those whose views and conduct he deems good ; but which leads its possessor to look upon all, the ignorant, the ungrateful, the wicked and criminal, with feelings of pity and kindness ;

the natural tendency of whose mind and conduct is habitually to exhibit that scriptural charity for others which "hopeth all things, thinketh no evil, and suffereth long, and is kind."

Endowed with such feelings and principles, he would be disposed to preach in an encouraging and consoling manner, and this we believe the best kind of preaching in Lunatic Asylums.

But let it not be supposed that a peculiar kind of preaching is required in such institutions. With few exceptions, there should be no departure from that kind of sermonizing that is usual elsewhere, and would be suitable to any well informed congregation composed of persons belonging to different religious denominations. Neither should the other exercises, the singing or the prayers be different. The audience should not be addressed as sick or irrational, or as a peculiar one in any respect. Everything sectarian should of course be avoided. Neither is it well to dwell largely upon obscure and controverted doctrines, or attempt to give minute and vivid descriptions of heaven or hell. Particular allusion to the Devil and his influence over men, we have noticed, has always a bad effect upon some, as many insane are disposed to believe themselves more or less in the power of the Devil.

"The doctrines I have deemed it most prudent to bring before the insane in my sermons," says the Chaplain of the Surrey Lunatic Asylum, "have been those of the most encouraging and consoling kind. I have generally set before them the great love of God, the willingness of the Lord Jesus Christ to save sinners, the necessity of resignation to the Divine will, the duty of prayer, the happy tendency of real religion to calm the mind and produce joy and peace in believing, and the prospect of heaven to all those who truly repent and turn to God."

Such doctrines, according to our experience, are the most useful to the insane. Many derive enjoyment, and we doubt not profit, from hearing them set forth, and to none do they prove injurious. But we have noticed that discourses of an

opposite character, on the exceeding heinousness of sin, the certainty of eternal damnation, and the stern requisites of Divine justice, have done good to none, but have increased the sufferings and added to the delusions of many who supposed themselves to be already suffering from the wrath of the Almighty.

As yet, we believe, at no Asylum in this country has the Chaplain participated in the moral direction and treatment of the patients to much extent, farther than by the religious services which we have mentioned. But we hope the time will come when this officer will—though we should consider it absolutely requisite before he engaged, that he should, as Jacobi directs, “make himself familiar with those writings which unfold all that experience has taught and is still teaching of the various morbid states of the mind.” He should have a good knowledge of Anatomy and Physiology, and of those writings that teach the dependence of mental phenomena upon the organization, and understand how often the former are deranged and the whole moral character changed by slight disorder of the latter.

Without this kind of knowledge, a Chaplain in his attempts to benefit the insane, by conversing with them, would be likely to do them harm rather than good. His very excellencies in other respects, his great benevolence, his earnest desire to console the desponding and despairing, and to reform the vicious—his hatred of everything sinful, and his habit of attributing all misconduct to depravity, would be likely to lead him to adopt, with the best intentions, a course with the insane, that would be injurious to them; for much experience shows that reasoning with the insane on their delusions by fixing their attention on them, proves prejudicial to their recovery.

In conclusion, we repeat, that we hope to see Chaplains thus qualified, attached to every large Asylum for the Insane. We believe they would be eminently useful.

ARTICLE III.

LUNATIC ASYLUMS IN ENGLAND.

[Our readers will recollect, that in the October number of the *Journal of Insanity*, we stated that additional provisions for the Insane in England, had been demanded in Parliament, and that the government then promised to bring forward at a future session a measure for that purpose. On the 6th of June last, that enlightened and persevering philanthropist Lord Ashley, to whom the poor of England are greatly indebted for his able advocacy of their interests, submitted to the House of Commons two bills for the better care of the Insane. On presenting them for consideration, he made the following able speech—a speech replete with valuable information, and which will well repay perusal.

We are pleased to be able to add that the bills thus introduced, after considerable discussion in the House of Commons passed that House the 23d, and the House of Lords the 31st of July.]—*Editor Journal of Insanity.*

Lord Ashley, in rising to bring forward the two bills of which he had given notice, said,—My motion requires some preliminary explanation. By the two bills I intend to effect the repeal of many existing acts respecting the treatment of lunatics, and substitute such other enactments in their place as time and circumstances have rendered necessary. Before entering into the general principle of my motion, I wish to observe that my proposition will apply only to England and Wales. I wish that circumstances enabled me to extend the bills to Ireland and Scotland; for I believe that not in any country in Europe, nor in any part of America, was there any place in which pauper lunatics were in such a suffering and degraded state as those in Her Majesty's kingdom of Scotland. (Hear, hear.) I assume, in the first place, that the House, or at least a considerable portion of those honorable members who may favor me with their attention, have read the report made in the last session of Parliament; and I will also assume that it is unnecessary for me to repeat the statement which I made in the course of last year on the subject which I now seek to bring under

your notice. It is necessary, however, I should begin by reminding you that the law affecting pauper lunatics naturally divides itself into four parts, and that that law, as it now stands, is embodied in nine several statutes. I hope that the House will allow me shortly to advert to the state of the law previous to the 14th of George III. Antecedently to that act there was no punishment for the neglect of pauper lunatics. There were no proper regulations respecting the diet, clothing, custody, or treatment of pauper lunatics; and there was no obligation on the visiting justices to inspect the Asylums above once a year. In addition to this disgraceful state of things, the practice was to admit pauper lunatics without medical certificates; and I am bound, likewise, to state this astounding fact, that medical men visited those establishments only twice a year. In some respects these evils had been remedied, and useful rules had been introduced; but no man who possesses the use of his understanding can doubt that abuses have continued, and, of necessity, must continue, until Parliament makes up its mind to discharge the important and urgent duty of placing the pauper lunatic asylums of the country upon a humane and rational footing. The nine several statutes to which I have already referred may be divided into four classes; first, those which are relative to county asylums; second, those relating to licensed asylums, public asylums, and the visitation of those respectively; third, relative to persons found lunatic by inquisition, the appointment of visitors, and of a "commissioner in lunacy," to perform duties formerly discharged by Masters in Chancery; fourth, relative to criminal lunatics.

Now, I do not intend to touch more than the first two of these classes. I mean to amend the several acts contained under class 1, as well as to amend and combine the three which are contained under class 2. The three bills contained under class 2 are as follows: 2d and 3d of William IV., c. 107; 3d and 4th of William IV., c. 64; and 5th and 6th of Victoria, c. 87. These various statutes I propose to

consolidate into one, entitled "A Bill for the Regulation of the Care and Treatment of Lunatics in England and Wales." But before I proceed further with this part of the subject, I may be permitted for a moment to recur to the state of the law antecedent to the 14th of George III. In these days there was no power of punishing any offence—there was not even the power of revoking or refusing any license. There was also extreme laxity in the signature of certificates, one only being deemed sufficient; and that might be, nay, it often was, signed by a person not duly qualified, or by the proprietor of the madhouse in his medical capacity; and to the care of this person the alleged lunatic was consigned. Houses licensed under this act were not required to be visited more than once a year. There was no power to discharge any patient who might prove to be of sound mind. Licenses could be granted only on one day in the year. Pauper lunatics were sent without medical certificates, and there was no return of pauper patients made to the board; and no plans were required of houses previously to the granting of licenses. There were no returns of the cases of lunatics kept singly in houses for gain. There were no visits of medical persons to the patients required.

One of the bills which I intend to submit to the consideration of the House will establish a permanent commission, and thereby secure the entire services of competent persons. It will give the power of far more detailed and frequent visitation, and fix the limits of expense, now regularly increasing. It will place "hospitals" or subscription asylums under proper regulations, by requiring them to have the same orders and certificates as are necessary in licensed houses, and by subjecting them to the same visitations as county asylums. My bill will also provide an additional security against the improper detention of pauper patients by requiring that the person signing the order for their confinement shall personally examine them beforehand, and that the medical officer who certifies as to their insanity shall

see them within seven days previously to their confinement. I may add that neither of these safeguards exists at present. I propose also, that my measure should compel every person receiving a patient to state his condition, mental as well as bodily, when first admitted, and the cause of his death when he dies. It will also direct that every inquiry and act of violence happening to a patient shall be recorded, and requires a case-book to be kept, thereby affording additional securities against mismanagement, and showing how far the patients have the benefit of medical treatment. It will also authorize the visitors to enforce a proper supply of food (in licensed houses) to pauper patients, who are at present fed at the discretion of the proprietor. Further, it will enable the visitor to order the admission of a patient's friends; at present, they are admitted or excluded at the caprice of the person who signs the order for the patient's confinement. It likewise will enable the visitors to sanction the temporary removal of a patient in ill health to the sea-side, or elsewhere. It moreover will enforce an immediate private return of all single patients received for profit, and authorizes the members of a small private committee, named by the Lord Chancellor, to visit them, if necessary. These returns are almost universally evaded at present, the law rendering it unnecessary to make any return, unless the patient has been confined for 12 months. The bill will give the Chancellor power to protect the property of lunatics against whom a commission has not issued, by a summary and inexpensive process, and it subjects all workhouses in which any lunatic is kept to regular visitation.

The second bill which I intend to lay before the House is called for by the facts which I produced in my statement of last year; and, presuming that the House will accept this bill, I think it may not be thought necessary for me to go over the evidence that was laid before the House last year; nevertheless, I do feel it necessary to call the attention of the House to the principal defects which are pointed out by our report as to pauper lunatics and county asylums.

First, that there are 40 counties in England, and only 16 county asylums; and 12 counties in Wales, and only one disgraceful borough asylum. Of the 24 counties in England having no asylums, one has 500, two upwards of 400, three upwards of 300, seven upwards of 200, and eleven nearly 100 lunatics each; and Wales has 1,000 lunatics. The second defect is, that of the 16 counties which have asylums, one has 800, one has 600, one has 500, one more than 300, three more than 200, and the rest more than 100 lunatics, for whom there is no accommodation in the asylums which have been erected, and no other receptacle. The third defect is, that all the existing asylums are full of incurables, or persons said to be incurable. The fourth defect is, that no system has been adopted in the county asylums to give preference to urgent cases, or those capable of cure. The fifth fault in the present state of the law is the detention of lunatics in workhouses, where there is no sufficient medical or moral treatment. At the union workhouse of Redruth there were 40, and of Leicester 30 lunatics; and at Birmingham not in the union 70 lunatics. The sixth is, there is no real visitation or true account of those lunatics who are not in asylums; for example, the lunatics of North and South Wales, and those in England not in asylums, being 9,339 with their friends or in workhouses.

I think I may now proceed to illustrate the necessity for these alterations by reference to one or two cases. I find, from the papers before me, that in Leicester "There were 30 insane persons, of whom three males and nine females were dangerous lunatics in the strict sense of the word, and most unfit inmates of the place, and where, as we were informed, they had been long detained in spite of the remonstrances of the visiting surgeon and some of the magistrates. In the parish workhouse at Birmingham there were 71 insane persons—subject to insanity in various forms, several of them being epileptics, liable after their paroxysms of epilepsy to fits of raving madness, during which they were usually excessively and furiously maniacal. The straw in

the paupers' beds was found filthy, and some of the bedding was in a disgusting condition from running sores, and was of the worst materials and insufficient; two cells in which three sick epileptic paupers slept were damp, unhealthy, and unfit for habitation; the beds of some of the private patients are in an equally bad state; nearly all the provisions of the law for the regulation of licensed asylums were violated. * * *

The magistrates of the borough, who are its visiting justices, had not visited the house for the space of a year *minus* eight days. * * *

In 1843 it was again in a very bad state; the paupers were still occupying what had been the coach-house and stables; the rooms were low, comfortless, and ill-ventilated, and one of the apartments most offensive. At Derby the condition of the private patients was improved; but three of the paupers were so bad that another communication must be made by the board to the magistrates of the borough. During the last year no visiting justices were appointed."

I will now, by a very striking example, illustrate the deplorable condition in which some of the pauper lunatics have been placed. I will mention the case of Mary Jones, who was consigned to the care of her mother. The report made upon her case I will now, with the permission of the House, read :

"We went to the cottage between 8 and 9 o'clock in the evening, accompanied, at our request, by Dr. Lloyd Williams, who interpreted to us the answers given to questions put through him. In a dark and offensive room over a blacksmith's forge, upon opening a bolted door, we discovered the miserable object of our search. The only window was closed up by boards, between which little air could find admission, and only a feeble glimmering of light. In the middle of this loathsome chamber was Mary Jones, the lunatic, on a foul pallet of chaff or straw, and here she had been confined for a period of fifteen years and upwards. She was seated in a bent and crouching posture on her bed of nauseous and disgusting filth. Near to her person, and

just within her reach, was a cup, into which she was accustomed to pass her excretions, which she emptied from time to time into a chamber utensil. This last vessel contained a quantity of feculent matter, the accumulation of several days. By her side were the remnants of some food of which she had partaken. Within a few feet of the pallet, which was on the floor, stood a large earthen jar, nearly full of fetid urine, the produce of the three other persons in the cottage. It had, as stated by the mother, been placed there in order that it might, from the warmth of the room, undergo a more speedy decomposition for the purpose of being used in dying wool. The stagnant and suffocating atmosphere, and the nauseous effluvia which infected it, were almost intolerable. Long and close confinement had produced in Mary Jones' person the most frightful distortions. The chest bone protruded forwards five or six inches beyond its natural place, and there was an excoriation of the parts below. The legs were bent backwards, and the knee joints were fixed and immoveable. The ankles and feet were also greatly twisted and deformed. She was emaciated in the last degree; her pulse was feeble and quick, and her countenance, still pleasing, was piercingly anxious, and marked by an expression of despair. Her garments were loathsome, and from her person was emitted a most offensive odor. * * For about 10 years past she had been confined to the dismal chamber in which we found her, the window of which had been boarded during nearly the whole of that time.

"August 14, 1844.—After I wrote to you yesterday, I gave her (*i. e.*, Mary Jones) some money to buy calico, which I had the day before done to Grace Williams, and I was gratified to find that she took a needle and thread and commenced sewing very tidily."

We have the clearest evidence, that if this poor creature had been properly treated in the first instance, she would have been completely cured. On the authority of Dr. Williams, of Derby, I am enabled to say, that she must have

been at one time fully capable of cure, and that she still had sufficient intellect to enjoy existence, when she was placed in favorable circumstances.

It is time that I should now come to that part of my statement which has reference to the alterations that I intend to propose. One of the bills which I shall ask leave to introduce, will be an extension of the act of the 9th of George IV., c. 40, making at the same time the following changes: 1st, instead of permitting, I propose to require, every county and borough which has no asylum to provide one, either for itself or in union with some other county or borough. 2d, that every county which has an asylum, but insufficient accommodation, is to provide further accommodation. 3d, in erecting new asylums, and providing further accommodation where it is required, regard should be had to the proportion of curable and chronic lunatics; I purposely avoid the use of the terms "curable" and "incurable." Separate buildings I propose should be provided for the chronic at a less cost, and parts of the workhouses, with the consent of the poor law commissioners, may be adopted, in which case they are to be separated from the other part of the building and to be deemed county asylums. 4th, counties having asylums may unite with other counties not having one. 5th, to extend the act to boroughs having courts of separate quarter sessions, and to every place not contributing to county-rates. 6th, to assist magistrates in erecting asylums, and ascertaining the proportionate numbers of curable and chronic lunatics, and providing separate buildings for them, and for diminishing the expense of building asylums, the plans are to be submitted to the Commissioners in Lunacy, and the estimates to the Secretary of State; asylums for boroughs I think may be erected without the boundaries of the borough. 7th, the time for the repayment of money borrowed for building asylums I propose to extend from 14 to 30 years. 8th, general rules for the government of asylums should be submitted to the Secretary of State. 9th, copies of the accounts of asylums are

to be sent to the Secretary of State. We also propose that all recent cases of lunacy are to be sent immediately to an asylum, for it is clear that if such cases are met with instant attention, the number of cures will be, as I have already stated, in the proportion of from 70 to 90 per cent.; whereas if they are suffered, by neglect, to become permanent or dangerous cases, the amount curable is not anything per cent., or at the very outside, and under the most favorable results, only from 6 to 8 per cent. We next provide for the reception of all lunatics who are not chargeable, whether wandering or otherwise; they are to be apprehended, and those whose friends can not pay for them are to be admitted into the asylums as paupers. Our next provision is, that a quarterly inspection of all lunatics who are not in asylums is to take place by a medical man, who shall return lists of them, describing their condition, to the Commissioners in Lunacy. Amongst other provisions appertaining to this part of the bill is one by which every pauper lunatic shall, in the first place, be deemed to belong to the parish from which he is sent, until he shall be proved to belong to another; and, with reference to this proviso, a clause will be introduced in order to protect counties from this casual charge becoming permanent, in cases where adjudications shall be made respecting lunatic paupers; and, lastly, power is to be given to remove chronic lunatics to the asylums provided for such cases.

I now proceed to state what the facts are which have been observed with respect to the actual state of the pauper lunatics in the great county asylums already established. The first asylum to which I shall advert is that of Hanwell, in Middlesex. In that asylum there were, in the month of March, 1844, 984 patients, of whom 30 only were reported to be curable. There were waiting for admission into that asylum 429 pauper lunatics, all of whom were only recent cases of insanity, and who, in consequence of the delay in applying a curative treatment, were fast becoming incurable. Within the first three months of 1844 there were no less

than 40 lunatic patients to whom admission was refused into the Hanwell Asylum, making in the whole year 160 patients. Of these, supposing that 6 per cent. were curable, there would remain permanently thrown upon the county of Middlesex for support, no less than 150 lunatics. The second instance to which I shall refer is that of the Lunatic Asylum of the county of Lancaster, where there were confined in the year 1844 about 600 lunatics. Of these the greater proportion had been previously detained in the workhouses of their different parishes so long as to greatly diminish all probability of their cure. In the whole county there were then waiting for admission into the asylum about 500 lunatics, for whom no room whatever could be made. I next turn to the Surrey Lunatic Asylum, where I find there were on the 1st of January, 1844, no less than 382 patients, of whom 362 were reported as incurable, whilst there were waiting for admission, in private asylums and elsewhere in the county, 209 lunatics. I take these very magnificent establishments because they afford striking examples of the want of provision for the treatment of recent cases, and they likewise offer the most convincing proofs of the increase of incurable lunatics throughout the counties, in consequence of the want of recent treatment.

Let us now look to the treatment pursued in other asylums, and contrast the effect of recent attention with those where the cases have experienced neglect of longer or shorter date. I refer in this respect to the report of the Dorset County Lunatic Asylum, and I find that at the Epiphany Sessions for the year 1845 there had been discharged during the year 23 lunatics as cured, of whom 17 had been admitted in 1845. And what did the superintendent say with respect to this fact? He reports thus:—"This is a larger number of recoveries than has taken place in any year since the opening of the institution, and may be attributed to a greater number than formerly being admitted in the incipient stage of the disorder." Of 16 persons who had been admitted during the first three months of

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their attack, no less than 13 were cured, making 81 per cent. Some of them had since proved to be cases of relapse, but of the whole of those cured the proportion was not less than 58 per cent., and in the cases themselves the disorder had existed for more than three and less than twelve months. In St. Luke's Hospital the cures during 1843 amounted to 63½ per cent., and in 1842 to 70¼ per cent., the cases in many instances having been of several months standing.

In a paper recently read before the Medical Society, communicated by Dr. Forbes Winslow, a gentleman who has paid much attention to this class of disorders, and who is justly entitled to be heard, it was stated that a large proportion of the many thousand incurable lunatics in England and Wales had been reduced to this melancholy state by the neglect to which they had been subjected in the incipient state of the malady. In fact, that nine out of ten cases recovered if subjected to treatment within the first three months of the attack; whilst from the reports of the State Lunatic Asylum of New York for the year 1844, sent to me by Dr. Brigham, I find it stated, that "Few things relating to the management and treatment of the insane are so well established as the necessity of their early treatment. * *

By examining the records of well conducted asylums, it appears that more than 8 out of 10 of the recent cases recover, while not more than 1 in 6 of the old cases are cured;" and I find the same facts reported by the physicians of the Hartford Lunatic Asylum, in the United States. One impediment, however, exists in this respect—I mean with respect to the speedy application of the curative treatment in cases of pauper lunacy—inasmuch as no magistrate has it in his power to authorize the transmission of a pauper lunatic to a private asylum for treatment in case the county asylums should be too full to receive them.

I now approach the financial part of our project; and, although I admit that this is a most dry and uninviting topic (hear, hear,) I still am under the necessity of entering upon some details respecting this branch of the subject, as it is

of the most essential, if not vital importance. (Hear, hear.) The main impediments in the way of constructing county asylums has been, and at present is, the fear of the enormous expense supposed to be necessarily attendant upon such undertakings. Now, the county asylum at Hanwell has cost in all the sum of £196,000. On the original cost the rate per head for 1,000 patients was £160, and on 800 patients £245. The Surrey asylum cost £85,000, or £237 per head for each patient; but this is far too large an estimate to be taken as an average of the cost per head. It is the opinion of the commissioners that £80 per head would be an ample allowance for the construction of lunatic asylums, provided the enlightened curative system in the treatment of patients recommended by the best authorities be adopted and acted upon. Of this we shall be able to furnish ample proofs in the committee on the bill. The great error, as it has appeared to us, in the construction of lunatic asylums, is, that they are all built upon the presumption that every one of the patients requires the same minute care and the same precautions in guarding him, as those esteemed to be curable cases. This view of the question greatly enhances the expenses.

But we look at the matter in a totally different way. We make a distinction between the different classes of lunatics; we provide a distinction between chronic cases and curable cases. For chronic cases of lunacy we provide good diet, warmth, clothing, air and exercise, and, in addition, occupation, which we recommend to be of the healthiest description—I mean occupation in the open air, such as gardening. But the chronic patients do not require the same careful supervision which the recent cases would constantly call for, nor do they require the same medical attention as the patients who are under curative treatment demand, and, therefore, the care and attention shown to them is not by any means so costly as that of the patients who are undergoing the whole curative process, and towards whom every minute precaution and care is constantly observed. Let us

take therefore the proportions of these respective classes of patients, and adapt them to the estimates for building new asylums. Suppose we take 12,500 pauper lunatics to be the number requiring accommodation. From this number deduct 10 per cent. for the harmless lunatics, who may safely be left at home under their relations' care. Of the remainder 40 per cent. are considered to be curable, and 60 per cent. are chronic or incurable cases. Apply this to an asylum having 300 lunatic inmates; deduct 10 per cent., there will be 270 left; of these 40 per cent., or 108, are curable, and to be admitted into the "recent case" hospital; the remainder, 60 per cent., or 162, are patients for the chronic department of the asylum. The gross expense of such an asylum would be as follows:—Taking the recent cases at £80 per head, they would amount to £8,640; and taking the chronic cases at £50 per head, they would be £8,100; making in the whole £16,740 for these two classes; but, as all cases of epilepsy and of violence must be under especial care in the recent case hospital, I will add one-sixth of the whole expense, or £3,200, to the sum already mentioned as the cost of this extra care, by which the sum total for 300 patients in an asylum will be £20,030.

We propose to extend the term of repayment out of the county rates of the cost of these asylums from 14 to 30 years; and if we compare the present average annual burden on the county-rates with that which our plan will impose, we shall find it stand thus:—The annual burden on the county-rates in the case I have referred to would be £666; the average expense of keep in 11 county asylums has been £170 per head. Thus, under the old plan an asylum for 300 lunatics cost £51,000; under the new plan, as I have just shown, £20,030. Take the gross expense of providing for 12,500 lunatics, at £170 per head, it would be £2,125,000 throughout England and Wales; whilst under our plan it would be £813,750, being a difference of £1,311,250, leaving for the 36 counties in England and Wales unprovided with asylums an average of £22,604

(and in many counties much less,) repayable in 30 years. Now, if we look to the number of chronic cases, and to the state of their treatment, we can not wonder at the enormous expense attendant on them. The average duration of a lunatic's life is estimated at 10 years; but this is a very low average. The annual cost has been shown to be £20 per head, and taking 60 per cent. of 5,600 or 3,360 lunatics at £20 per head, would cost £67,200 for one year. If allowed to become incurable, their cost in 10 years would be £672,000. In the same ratio, if you take the number of lunatics in workhouses at 4,500, being 60 per cent. upon 8,000, their cost in one year at £20 per head would be £90,000, and in 10 years it would amount to £900,000. Now, with respect to the duration of life in an insane person, I am strongly persuaded that the average of 10 years is far too low a basis to calculate upon. Dr. Hitch, of Manchester, says that insanity by no means shortens life, and he gives tables to show this.

I may here call attention to another feature in the economy of the plan which we propose, namely, that under the present system at Hanwell, which may be taken as the case of every other asylum, there are only 6 per cent. cured, instead of 60, whilst there are 160 applications refused every year. Thus there are 94 incurable lunatics thrown annually upon the county. Had these been treated within the first six months, they would have cost, at the rate of 16*l.* 11*s.* 6½*d.* each, the sum of 1,591*l.* 10*s.*, whereas if they became incurable, and lived for 10 years, they would cost £31,830. The county of Middlesex alone would, by the plan which we recommend, save upwards of £30,000 a year in this respect alone. And as the saving will go on in the same proportion during the whole of the 10 years that the lives of pauper lunatics are estimated to endure, the saving will, in the end, be more than sufficient to cover the whole expense of the asylums erected for the reception of recent cases.

But this is not all the good that will result from our plan. By recovering the patient, not only will the expense of his

maintenance for life in a lunatic asylum be avoided, but he will be restored to his occupation, and his family, instead of being thrown upon the parish for support, will again look to him for their means of existence. The system which we propose to substitute for the present one will effect a cure in 70 cases out of every 100. The cure must, however, be so conducted as to render it as complete as possible. With respect to this part of the subject, I may refer to Dr. Conolly and to Dr. Julius, of Berlin; the last-mentioned person thus writes upon the topic in a letter which has reached me:—"Every public or private institution has certain limits in which it must be restricted." He insists particularly "on schools, hospitals, and, more than all, penitentiaries and lunatic asylums, where the individualizing treatment of every case will contribute most, and more than anything, to its success." However, the present bill is to affirm that pauper lunatics must be provided for and maintained. With respect to paupers, it must be manifestly clear that they are entitled to every attention which money and kindness can procure; and I would ask, how is it possible that in those private asylums, for the sum of 8s. a week, the whole curative system can be carried through, and proper attention be bestowed upon the patients, so as to afford the proprietors anything like a remuneration? (Hear, hear.)

It seems unnecessary that I should weary the house further upon this part of the subject; still less do I think it necessary to enforce upon an assembly of educated, humane, and liberal-minded men, the necessity for making provision for those unhappy and destitute beings who by a wise, though inscrutable dispensation of Providence, have been made subject to this awful calamity, and whose suffering and helpless condition demands that they should receive an unusual share of sympathy from every one of us. (Cheers.) But it is remarkable how slow and tedious has been the process whereby we have arrived at this rational and kind mode of treatment, which now appears to be recommended to all of us, not only by the dictates of humanity, but also by

common sense. I do not think that until the period of the Reformation there is a single instance of a lunatic asylum being established. Persons of station and wealth were confined in their own houses, and whips, chains, and darkness and solitude, were the approved remedies. That practice has indeed descended to our own times, and Dr. Conolly states, that he has formerly witnessed "humane English physicians daily contemplating helpless insane patients bound hand and foot, and neck and waist, in illness, in pain, and in the agonies of death, without one single touch of compunction, or the slightest approach to a feeling of acting either cruelly or unwisely. They thought it impossible to manage insane people any other way." It belonged to the French nation—to the genius of French professors—first to make this mighty advance in the cause of humanity. It was reserved for M. Pinel, the great physician, to achieve this great work. The account given of it before the Academy of Sciences by Scipio Pinel is so graphic, that, with the permission of the House, I will read it. (Hear, hear.)

"Pinel undertook what appeared to be the rash enterprise of liberating the dangerous lunatics of Bicetre. * * * He made application to the Commune for permission. * * * Couthon offered to accompany him to the great Bedlam of France. They were received by a confused noise—the yells and angry vociferations of 300 maniacs, mixing their sounds with the echo of clanking chains and fetters through the dark and dreary vaults of the prison. Couthon turned away with horror, but permitted the physician to incur the risk of his undertaking. He resolved to try his experiment by liberating 50 madmen, and began by unchaining 12. The first was an English officer, who had been bound in his dungeon 40 years, and whose history everybody had forgotten. His keepers approached him with dread; he had killed one of their comrades by a blow with his manacles. Pinel entered his cell unattended, and told him that he should be at liberty to walk at large on the condition of his promising to put on the camisole, or strait-

waistcoat. The maniac disbelieved him, but obeyed his directions mechanically. The chains of the miserable prisoner were removed; the door of his cell was left open. Many times he was seen to raise himself and fall backwards—his limbs gave way; they had been fettered during 40 years. At length he was able to stand, and to stalk to the door of his dark cell, and gaze with exclamations of wonder and delight on the beautiful sky. He spent the day in walking to and fro, was no more confined, and, during the remaining two years which he spent at Bicetre, assisted in the management of the house. The next madman liberated was a soldier of the French Guard, who had been in chains ten years, and was the object of general terror. * * * His disorder had been kept up by cruelty and bad treatment. When liberated, he assisted Pinel in breaking the chains of his fellow-prisoners; he became immediately kind and attentive, and was ever after the devoted friend of his deliverer. In a few days Pinel liberated 53 madmen. The result was beyond all hope. Tranquility and harmony succeeded to tumult and disorder; even the most furious maniacs became tractable." (Hear, hear.)

That was, indeed, a great work. Would to God that such were the character, the motive, and the end, of all our rivalries with that great nation! Well would it be for mankind if, by mutual harmony, we kept the world at peace, whilst we prosecuted and enforced our mutual discoveries. (Cheers.) The system passed from the French nation to this country, but it was of slow growth, and I believe that we are mainly indebted for it to the Society of Friends and to the family of the Tukes. (Cheers.) Samuel, the son of William Tuke, is still alive, and he must be gratified to see that this system has obtained not only the approval, but the imitation of all the best and wisest men in this country, and I believe I may add, in America also. (Hear, hear.) There is the greatest enmity in almost all the subordinate officers of lunatic asylums to depart from the system of coercion; and perhaps it is natural, for it gratifies all their feelings of pride,

temper, and interest. The disclosures which have already been made with regard to private lunatic asylums prove that if the system of supervision were abated, things would soon relapse into their former state; and of the necessity of no one point is Mr. Tuke more convinced than of this. He says it will prevent a great deal of legislation, and will be the best means of putting an end to the abominations which those disclosures revealed. (Hear.) It is, then, our duty and interest to deliberate well upon this subject. Here we are, sitting in deliberation—a set of reasoning men; to-morrow we may be helpless as those poor creatures whose case we are considering—a fever, a sudden reverse, the loss of a dear friend, the loss of fortune—any one of these may in an instant reduce us to their level, our mind may become a wreck, and we may remain a sad, but salutary lesson of the frail tenure by which we hold all that is most dear to us. (Hear, Hear.)

But it is, and I am thankful that it is so, the temper and character of our times to look to these things as incentives to more active exertions. In that spirit, therefore, I entreat the co-operation of the House to assist me in effecting this great object; and be assured that such labors will not be without their reward; for either you will behold the blessings of health and happiness visiting one of the emancipated sufferers, or you will enjoy the high pleasure and gratification, (and none can be higher,) of having toiled with disinterestedness and zeal for those who never will be able to make you the least compensation. Thanking the House for the attention which it has devoted to me, I conclude by moving for leave to bring in the bills of which I have given notice. (The noble lord resumed his seat amidst general applause.)

Sir J. Graham said,—Sir, I rise with sincere satisfaction to second the motion of my noble friend. (Cheers.) The House will remember—it would be impossible in justice to forget—the speech which my noble friend made on this subject towards the close of last session. That speech made

on me, and on every one who heard it, the greatest possible impression, and I gave to the House and to my noble friend an assurance then, on the part of the Government, that it was impossible any longer to neglect a subject so important, so touching, so connected with feelings, some of the most painful, but at the same time the most humane of our common nature. (Cheers.) I declared then, to the House, that the attention of the Government should be directed to the subject. I wish I could have commanded more time to have bestowed on it; but I have had the satisfaction of receiving in the most cordial manner the assistance of my noble friend, and in common with him I have during the interval of the recess, directed my consideration carefully to this matter, and the fruits of that consideration are now before the House. (Hear, hear.) With reference to Ireland, I may state that my right honorable friend, the Secretary for Ireland, has introduced a bill on this very subject, extending to that portion of the empire; and with regard to Scotland, though I do not say that the proposals contained in the bill of my right honorable friend, the Lord Advocate, meet the whole of my noble friend's views, still it is intended to meet a very important part, viz: the treatment of pauper lunatics in Scotland.

Having thus glanced at those measures, I shall say no more, except with reference to this bill. I have the satisfaction of stating to the house that the measures which my noble friend seeks to introduce have been carefully considered by Her Majesty's Government; that they have come under the view of the Lord Chancellor, within whose jurisdiction such matters more especially come: and that I believe all the measures which my noble friend wishes to introduce are introduced with the Lord Chancellor's entire approbation. (Hear, hear.) That portion of the measure which is connected with the care of pauper lunatics has also been carefully considered by Her Majesty's Government, and the provisions sought to be introduced with reference to pauper lunatics meet with their entire concurrence. With reference to

the subject generally, I also, in common with my colleagues, considered that it deserved our support; and though some of the details may perhaps require some alteration, yet, generally speaking, we determined to give the bill, as a Government, our most cordial support. (Hear, hear.)

Now, Sir, I must say that we are deeply indebted to my noble friend for the assistance which he gave me in this matter. I have said with truth, that I could not devote as much time as was necessary to this important inquiry; but even if I could, there are many qualities which my noble friend possesses which I could not have brought into action. His great experience, his indefatigable zeal, and above all, his humane heart, have induced him to pursue this subject (from which many men would be disposed to turn aside) with a degree of assiduity and kindness which are above all praise, and which entitle his opinions to be regarded as an authority upon the subject. (Hear, hear.) I have therefore been very happy to act in concert with him. It would be impertinent in me, after the very able and impressive speech which my noble friend has made, to waste your time by going into the details of the bill, which will be more advantageously considered in the course of its progress through the house; but, at the same time, I may mention one or two important matters in which I particularly agree with him. (Hear, hear.) The first to which I allude attaches the greatest importance to a constant supervision of all these asylums. With that I wholly concur, and I am of opinion that a constant supervision cannot be secured by unpaid commissioners. I concur also in the necessity of some supervision, and even of visitation of private establishments, though they should contain very few or only one patient. On that subject last year I entertained some doubts; but the result of the inquiries which I have since made has led me to the conclusion that on the whole, restricted as such visitation will be, it would be useful and efficacious. I also agree with my noble friend in the necessity for the erection of establishments for patients whose cases have assumed a chronic form, as distinguished from those

whose maladies are of a more recent date. It is impossible to resist, I think, the evidence which he has brought forward with regard to the melancholy manner in which the institutions of the country are at present choked by incurable cases, to the almost utter exclusion of curable cases. (Hear, hear.) I must also express my opinion, that even should the calculations of my noble friend with reference to the saving of expense not be sustained in every particular, yet that it is a paramount duty that ample provision should be made to obtain the cure if possible—and where not possible, to secure the safe custody and comfort of those unhappy persons under circumstances of as little restraint as their melancholy condition will allow; and I may add, that I know of no object to which the wealthy could more praiseworthily contribute in their desire to relieve the condition of suffering humanity. (Hear, hear.)

My noble friend has observed, that the improvement in the treatment of the disease has been slow. I am bound to say, that though slow, it has been progressive, and I see with great satisfaction in the House, to-night, my right honorable friend the member for the county of Montgomery, (Mr. Wynn,) who at an early period of his life devoted much of his valuable time to this important subject. (Hear, hear.) I hope and believe that the proceedings this day will be most satisfactory to his feelings. I always admired the course which he pursued with regard to this subject, and I am glad to see that the day has come when his wishes may be gratified. (Hear, hear.) The time, I think, has arrived when what was permissive shall be compulsory—when the counties throughout England and Wales shall be compelled by law to find sufficient means and accommodation for the cure and custody of those unhappy persons to whom my noble friend's measures refer. (Hear, hear.) I might detain the House longer, but I think it will suffice that I say no more now, than that I have the greatest pleasure in seconding the motion of my noble friend. (Cheers.)

ARTICLE IV.

LUNATIC ASYLUMS IN THE UNITED STATES.

(Continued from page 68.)

NEW YORK.

1. *Bloomington Asylum*.—For particulars of this well conducted establishment, see the first article in the preceding number of the Journal.

2. *New York City Lunatic Asylum, Blackwell's Island*.—This is but a part of the City Alms-House, and is governed by the City Authorities. Drs. Hasbrouck and Stewart have the medical charge of the establishment. The former is Physician in Chief to the Alms-House, and appoints or nominates his assistants. Dr. Stewart has been thus appointed Resident Physician at the Lunatic Asylum. The medical officers to these establishments are changed very often—usually whenever the politics of the city changes. This is deeply to be regretted, and we hope the practice will not long be continued. We hope to see an ordinance passed to appoint a Superintendent to the Asylum, who shall be a skilful physician and subject to removal or re-election no oftener than once in ten years, except by infidelity to the trust reposed in him, or for incompetency.

At present, prisoners from the penitentiary are employed to attend upon the patients. This we believe to be very wrong. We suppose prisoners are employed to save expense, but we are confident that this is mistaken policy—and that it will be ultimately cheaper for the city to make the Asylum a good curative Institution—which it never can be, so long as the Physician is annually changed, and prisoners are employed as attendants upon the patients.

3. *New York State Lunatic Asylum, Utica.*—For a brief notice of this establishment the reader is referred to the first article in the first volume of the *Journal of Insanity*. Present number of patients, 270. Additional buildings are now erecting, and when completed, the Institution will be able to accommodate 600 patients.

4. *Hudson Private Lunatic Asylum.*—It was established in 1830, by the late Dr. Samuel White. From the time it was opened, July 1st, 1830, to July 1st, 1845, a period of 15 years, 615 patients were received, of which number 307 were cured, and 46 died. During the last year, the admissions were 17; discharges 15; recoveries 11. Present number, 21.

This Institution is now well known to the public, and, as will be seen above, has been extensively useful.

Since the death of its distinguished founder, it has been conducted by his son, Dr. G. H. White, and from late notices in the public papers, we are pleased to learn that it is in successful operation, and continues to merit the confidence and patronage of the public.

5. *Dr. Macdonald's Private Lunatic Asylum, Sanford Hall, Flushing, L. I.*—In the summer of 1841, Dr. Macdonald established a Private Lunatic Asylum at Murray Hill, in the suburbs of the city of New York. Here it was eminently successful, but wishing to put the establishment on a more liberal and permanent basis, the proprietor has recently purchased the buildings erected for the private residence of the late Chancellor Sanford, at Flushing, and to which he has removed the patients under his charge.

From the opening of the Institution, in June, 1841, to April, 1845, the whole number of admissions has been 106; of this number, 58 recovered and 7 died. Present number, 20.

The location of this Institution at Flushing is a very desirable one. The buildings are extensive and elegant, and were so constructed as to form as complete a residence for

a gentleman's family as could be desired, and admirably arranged for the purposes to which they are now devoted. Dr. Macdonald has had large experience in the treatment of the Insane, having been for a number of years Physician to the Bloomingdale Asylum, and is well qualified to conduct such an Institution successfully. We hope in a future number to present our readers with a more minute account of this Institution from the pen of its accomplished proprietor.

NEW JERSEY.

There is no Asylum for the Insane in this State, but one is about to be erected at the expense of the State, at Ewing, near Trenton, as was stated in the last number of this Journal.

PENNSYLVANIA.

1. *Pennsylvania Hospital for the Insane.*—For particulars of this excellent Institution, see the first article in the present number of the Journal.

2. *Asylum for the Relief of Persons deprived of the use of their Reason*—or the Friends' Asylum for the Insane, near Philadelphia.—This Institution was opened for the reception of patients in 1817. It was established by members of the Society of Friends, at a cost of forty-six thousand dollars, and has accommodations, we believe, for about 70 patients. Attached to it are 62 acres of land. It was originally designed for the accommodation of members and professors of the Society of Friends, but from the year 1834 others than members were admitted, until the present year, when the Contributors resolved to limit admissions to those connected with the Society of Friends, and to those unconnected with them who have ever been in the Institution as patients.

It is, we believe, a well conducted and useful institution, though it is managed somewhat different from most other Lunatic Asylums in the country. The officers are a Superintendent and wife, a Resident Physician, and a Visiting

Physician. The latter is considered the superior medical officer, but visits the Asylum only twice a week.

This arrangement is said to be satisfactory there, but we think the superior medical officer should reside at the Asylum, and, under the direction of the Managers, be the responsible head and Superintendent.

The Report for 1844-5, by Drs. Evans and Worthington, is an interesting one, and the following extract from it we commend to the attentive consideration of our readers.

"But there is one evil prevailing in the community, and more especially in the large cities, which from the influence it exerts upon both the mental and physical system, there is reason to fear may prove a fruitful source of insanity: that is, the fashionable mode of education, which may be not inappropriately styled the hot-bed system. Soon after a child is able to talk and walk, ere the bones of the cranium are fully consolidated, and long before the brain has acquired its mature consistence, he or she is placed at the "*infant school*," and the application of stimulants commences to induce an activity in the functions of the brain, which is altogether unnatural and unhealthy. To judge from the every day course pursued in these seminaries towards their little inmates, we might suppose their instructors had adopted the opinion, that the faculties of the mind could be called into constant and wearisome exercise, altogether independent of the body; and that however greatly excited it might become, there was no danger of injurious reaction upon the delicate and imperfect machinery with which it manifests itself. Thus we see the strongest passions which influence the heart, fear and the hope of reward, continually appealed to, in order to induce the child to task its undeveloped powers; and so thoughtless or ignorant are the greater part of parents and guardians, that those schools are in the highest repute, which are supposed to unfold the infant mind with the greatest rapidity. This is not the place to dilate upon the various means resorted to, with the intent of seducing little children

to give up, or repress their natural love of play and motion, that so they may with more willingness consent to pass six or eight hours of the day, breathing the confined air of a school room. Books, prints and games of various kinds are all pressed into the service, and the little student is expected to constitute it his chief amusement, to acquire a verbal knowledge of some of the facts connected with the different branches of Geography, Geometry, Natural History, &c. For those of more advanced years the system is unchanged, and scholars, both girls and boys, are urged to task their mental powers, throughout nearly the whole course of the day; the time out of school being necessary for unrelaxed efforts in preparing for the wearisome and diversified recitation, which they are expected to perform without faltering when convened. While this eagerness is manifested to force the growth of intellectual fruit, and every new plan to convert children into prodigies of learning is entertained with approbation, the responsibility of conducting the moral culture so as to curb the evil propensities, and inure to self-restraint is far too feebly felt, while the proper developement of the physical system is neglected and apparently almost unthought of.

" During the season of youth, the brain is profusely supplied with blood, and highly susceptible of irritation, and therefore requires to be guarded with peculiar care, lest its delicate structure be injured or destroyed. But the natural tendency of the defective course of education here alluded to, is to undermine the general health, and in an especial manner, by undue mental excitement, to produce a morbid condition of the organism through which the mind acts. From hence can often be traced the train of nervous complaints which the Physician is called upon to relieve; and although insanity is but rarely developed in childhood, yet from the same source, too frequently originate those cerebral lesions, which in the course of time overwhelm their victims with mania or melancholia. In the course of the thirteen years, during which the attending Physician has been con-

nected with the Asylum, several patients, both male and female, from fifteen to twenty years of age, have been admitted whose loss of the use of their reason was mainly attributable to the serious errors committed in their education. The evil is a serious and a growing one, and no proper opportunity should be omitted, for awakening the public mind to a just conception of the unhappy consequences which may result from it."

Besides those accommodated at the two institutions mentioned, a large number,—we believe from two to three hundred,—are kept in a wretched condition at the Philadelphia Alms-House. This the city should remedy, by building a separate, comfortable and curative establishment for the insane poor of the city, as Boston and New York have done.

Pennsylvania is as yet without a State Lunatic Asylum. For several years past, great efforts have been made by benevolent individuals to induce the Legislature to establish one, and during the last session, this body passed an act authorizing certain commissioners "to purchase a lot of land not less than 100 acres, within ten miles of Harrisburg, as a site for an Asylum to be built of brick or stone." The act also provides that "said commissioners shall so build, finish and furnish said Asylum, that the whole cost of said building and furniture, with suitable apparatus for heating the rooms, for cooking and for furnishing water for all the uses of an establishment to accommodate 250 patients, and the necessary attendants, *shall not exceed fifty thousand dollars.*" Said commissioners are to receive no compensation for their services other than their necessary expenses, and are to give bonds for the faithful performance of their duties.

This seems to us, either that those who passed this act knew but little what an asylum for 250 insane ought to cost, or else it is only intended to give the whole subject the *go by*, for a few years more. Most assuredly, an establishment for such a number can not be built for \$50,000, and we hope there will not be an attempt to do it, as the result ultimately will be unfavorable to the accomplishment of the

main object intended, viz: to provide a comfortable abode for the insane, where every chance for their recovery may be afforded them.

DELAWARE.

There is no Asylum for the Insane in this State.

MARYLAND.

1. *Maryland Hospital for the Insane.*—In 1797 Mr. Jeremiah Yellot of Baltimore gave seven acres of land to the State, on condition that the Legislature should establish a Lunatic and General Hospital. The next year the Legislature made a grant for this purpose, and with aid from the City of Baltimore and benevolent individuals this Hospital was built, and until within the last seven years it received both the Insane and those suffering from other diseases. But since that time it has been exclusively devoted to the Insane. It is pleasantly situated on a commanding hill about one mile from Baltimore. Ten acres of land are attached to it. It has accommodations for 120 patients. Total cost of building and grounds \$200,000. Since it has been devoted to the Insane, 553 patients have been admitted of which number 265 have been cured. Present number 87. It should however be borne in mind that this Lunatic Hospital, contrary to the practice of most others, receives cases of *Mania-a-Potu*, (a very curable disease) consequently the recoveries at such an Institution can not properly be compared with those of other Lunatic Hospitals. During the past year 13 cases of this disease were under treatment, and *all* recovered. We are of opinion that cases of *Mania-a-Potu* ought not to be received into Asylums for the Insane. Dr. William Fisher is the Resident Physician, and under the general supervision of the President and Visitors, has the superintendence of the establishment, and conducts it with much ability.

2. *Mount Hope Hospital, (late Mount St. Vincent's.) Baltimore.*—This Institution belongs entirely to those pious, self-sacrificing and benevolent females of the Roman Cath-

onic Faith, known as the "Sisters of Charity." They formerly had charge of the Insane in the Maryland Hospital, but in 1840, in consequence of some disagreement with the Board of Visitors, their connection with the Institution was dissolved.

They then purchased the St. Vincent Lunatic Hospital, into which patients were received until May, 1844, when the Sisters purchased the property known as the Mount Hope College, and to which they removed their patients. There are two departments in this Institution, one for the Insane, and one for those suffering under other diseases. Present number of patients in the Insane Department, 46. Number admitted during the year, 63—of which number 27 were cases of *Mania-a-Potu*, 22 were recent cases of Insanity, 13 of which recovered. Deaths during the year, 6—two were insane, and four died of *Mania-a-Potu*.

The Institution is now crowded, and additional buildings are erecting. The last Report says, "Patients have flocked to us from sections of the country as remote as New Orleans, Natchez, St. Louis, &c., as the column in the table, indicating their residence, will show. The cause, doubtless, of this gratifying preference of this Institution, is the high estimation in which are held the services and self-denying attentions of the Sisters; for this Institution is the only one of the kind in the United States in which the Sisters of Charity are untrammelled and unrestrained in the performance of their offices of self-sacrifice for the benefit of the often neglected lunatic."

We can not learn from the Report whether there is a Physician, resident at the Institution, or not. Wm. H. Stokes signs it as Physician. The treatment, as set forth in the Report, appears to be judicious.

We regret the necessity of abandoning the name of St. Vincent. We know not of one more appropriate for a Hospital—for at present we do not recollect any—not even that of Howard, which stands higher on the list of those who have devoted their lives to deeds of benevolence, than Vincent de Paul.

VIRGINIA.

Virginia has two State Institutions for the Insane,—one at Williamsburg, near James River, and another at Staunton, in the valley between the Blue Ridge and the Allegany Mountains. The former is denominated the Eastern, and the latter the Western Lunatic Asylum.

1. *Eastern, or Williamsburg Asylum.*—This is probably the oldest Asylum for the Insane in the United States. On the 10th day of November, 1769, an act passed the Colonial Government, making provision for the lunatics and idiots of the Colony. On the 10th of July, 1770, the Court of Directors, appointed by the Governor and Council, held their first meeting. Proposals were received during that year, for building a Hospital, and on the 14th day of September, 1773, the building was completed, at an expense of £1,070, and delivered to the Directors. The Hospital has always been supported by annual appropriations from the Treasury of the State. The appropriation asked for the present year is \$25,000.

It was not originally designed for the poor only, but such as had estates were and have ever since been admitted, and charged a moderate board, out of the nett profits of their respective estates, which is still paid into the State Treasury.

The buildings were not designed for an Infirmary, but for an Asylum for Lunatics and Idiots. The original Hospital consisted of but one building of brick, two stories high, about 100 feet front; a neat pediment in the centre, with apartments for the keeper, and the ends hipped roofs, containing twelve cells each side for patients. In late years two more brick buildings have been erected, 90 feet from each end of the centre building, running north in parallel lines and corresponding in dimensions and appearance to the centre or original building; and a wing 90 feet long, two stories high, has been erected, connecting the centre with the western collateral building, and resembling in appearance at present the Worcester Hospital, in Massachusetts. The

rooms are 11 by 12 feet. Within the last year it has been again enlarged, and its arrangements, especially for classification, much improved.

Dr. John M. Galt is the Superintendent. He is still quite a young man, but very zealously devoted to the study of Insanity, and to the improvement of the condition of the Insane.

In his last Report he thus refers to the necessity of increasing the comforts of the insane in order to effect their cure:—"I am more and more convinced, both by the experience of our own Asylum and also that of others, that the most desirable basis for the treatment of insane persons in institutions for their reception, is a high standard of comfort. In many instances patients received into an Asylum, are taken from close confinement at home, or from dark and disagreeable rooms in a jail; being admitted from such situations, if the Asylum is comfortable and pleasant, the mere change in itself is soothing and restorative; an action both physical and moral is exerted upon a disease which essentially effects both of these two elements of our nature. But if the apartments are unpleasant, if due attention is not given to comfort, the patient is apt to be discontented, the irritation natural to the disease is increased greatly; and thus the incurable are rendered more difficult to manage, and the curable have their recovery obstructed or prevented. Motives of philanthropy would then dictate great attention to this point."

In conclusion he thus remarks, "During the past year and that preceding it, much has been done in this country and abroad, towards bettering the condition of the Insane. Improvements have been introduced in many of the American Asylums. A Journal especially devoted to the subject of Insanity has been established in France, and one of a similar character in this country. There is, too, an evidently increased interest on the subject, in society generally: individuals unconnected with the management of Asylums, have been actively engaged in many instances, either in aiding the

efforts of those having their charge, or in attempting to benefit the Insane in some especial manner. In several of the States of the Union not yet possessing Asylums, the Governors have recommended them in their annual messages. Many of our Asylums now in operation, have also been enlarged, thus increasing the amount of good which they are capable of affording to the Insane. There is much good, too, resulting to the same benevolent cause, from the mass of information and experience which is obtained by each Superintendent of our Hospitals, through the constant interchange of Reports. But there is now an additional mode in practice, for imparting mutually the experience of the different Institutions for the Insane. I refer to the convention of Medical Superintendents. I esteem it a great privilege to have been able to attend the first meeting in October last: doubtless it is the germ of great future good. Nor is the sympathy and community of feeling with regard to doing all that can be done for the benefit of the Insane, confined to the philanthropists and physicians of our own country. There is great attention directed also from the Asylums of one country to the transactions of those placed in others; there is a general sympathy and lively interest on the subject."

To the Report is appended a letter from the Chaplain, the Rev. J. S. R. Clarke, who has been connected with the Asylum for about one year. In this letter he gives his *reflections* and *speculations* respecting the religious instruction of the Insane, at considerable length.

Some of his propositions for the improvement of the Insane we think very questionable, and should apprehend far more injury than benefit from attempting to reduce them to practice. For instance, he inquires, "If the Insane can be made to comprehend religious instruction, why may they not become interested in their spiritual condition? And if they should become as deeply interested in their spiritual welfare, as we have known some of the entirely sane to do through the instrumentality of religious instruction, why may not this religious concern operate on the principle of

revulsion in effecting their cure?" Again he says, "In a small class of patients, now generally admitted to be small, whose derangement may be traced back to erroneous notions on the subject of religion, we discover another advantage arising from the employment of a Chaplain and religious services in a Lunatic Asylum. As in these instances, religion proper is not the cause of the derangement, but mistaken views of its Author and His requirements, some attempt at their correction is necessary to be made in order to effect their cure. The patient's mind should be probed, his religious views ascertained, his erroneous notions dissipated by the light of sound instruction. He should be made to feel that he has the sympathy of some one, in whose piety he has unshaken confidence; he should hear the encouraging voice of prayer addressed in his behalf to Him, in whose omnipotent hands is the disposal of all things, not even our mental health or disease excepted."

We regard the proposition of curing the Insane by the *revulsive operation of religious concern*, as improper and dangerous—and as to removing religious errors and delusions in the way he proposes, we are of opinion that no good will result from it, but positive harm, from thus directly assailing the delusions of the Insane. There is no more hope of removing religious delusions by the "light of sound instruction," than there is of removing any other delusions of the Insane by the same means. All experience shows that this course serves but to fix the delusions the more strongly by causing the mind to dwell constantly upon them.

2. *Western Lunatic Asylum, Staunton.*—This Asylum was opened for the reception of patients, in July, 1828. It was established by an act of the Legislature, appropriating for its construction \$10,000, but the buildings have since, from time to time, been enlarged by subsequent appropriations. The Institution has no fixed annuity for its support, but depends upon the Legislature for annual appropriations from the treasury of the Commonwealth for

this purpose. These appropriations vary in amount according to the wants of the Institution, as reported by the Court of Directors. For the present year \$23,000 are asked for.

The Institution was designed for the insane citizens of Virginia, without regard to their pecuniary circumstances. The poor have equal claims with the rich, upon its apartments. Those, however, who are able, are required to refund to the Commonwealth, what the Court of Directors may deem equivalent for the cost of their maintenance therein. The Asylum can now accommodate 220 patients.

This Institution is under the able superintendence of Dr. Francis T. Stribling, and is in a flourishing condition. Its geographical position is more favorable than that of the Eastern Asylum, hence, it is constantly full, and as the Directors of the Eastern Asylum state, is able to select such cases as are most recent and of course most curable, thus doing injustice to their Asylum by keeping it filled with old and incurable cases. They therefore propose an alteration of the present law which directs that "lunatics from any part of State be sent to the nearest Asylum," so that each Asylum shall have a district of the State assigned to it proportioned to its means of accommodations.

We notice that colored persons are not received as patients into the Western Asylum, but we believe they are into the Eastern. Dr. Stribling, in his last Report, alludes to the necessity of some provision being made for insane colored persons of Virginia, and also urges upon the Directors the importance of "owning such slaves as are necessary to aid in the operations of the Asylum." The following extract from his Report embraces both these subjects :

"One of the greatest difficulties which we have to encounter in the management of this Institution, results from the fact, that the services of slaves can not be dispensed with. Although we never permit them, under any circumstances, to direct or control a patient, yet their duties are of such a character as to bring them frequently into inter-

course with the patients, and thus afford them an opportunity to exercise no small degree of influence upon their mental quiet and physical comfort. Much—very much, therefore, depends upon the character, habits and disposition of the servants, and however excellent these may be, much trouble and anxiety devolves upon the officers of this Institution, in training them for the peculiar duties they are required to perform. It will readily occur to every thinking mind, that it must be extremely difficult to obtain such as possess the proper requisites, and that when procured and instructed, they should be highly prized. Under the present system, however, if we are so fortunate as to hire those who seem to answer well our purposes, it too frequently happens that they can be retained but little longer than their worth is discovered. Those who have had experience with servants, accustomed to being hired, know that they become fickle and capricious—fond of change, and averse to remaining long at any one place, and that, unfortunately, it is too much the habit of their owners to indulge them in this respect. The consequence is, that the officers of this Institution are in danger of being restrained from enforcing that discipline which is indispensable to its success, or by doing so, have to apprehend that at the close of the year they will be compelled to exchange servants who are considered in many respects valuable, for others who are ignorant of the duties required of them here, and about whose characters and dispositions we can know but little. Other reasons of equal weight might be advanced in support of the proposition that the Institution should own its servants, but it is deemed useless to present them; we only add, that as a question of economy, irrespective of its bearing upon the feelings and comfort of the patients, its seems to us fully to merit the approval of the Legislature; and nothing more will be needed to establish the correctness of this opinion, than simply to state the fact, that during the present year, the Institution, (without exceeding the usual amount paid for hire in this section of the country,) has paid the sum of

\$1370 39, for the services of those who could have been purchased (or others equally as valuable) for \$10,300, being upwards of 13 per cent. upon the amount of capital which would have been invested had they belonged to the Asylum. There can surely be no good reason why the Commonwealth should continue to pay such a per cent., and yet this will be inevitable, until she purchases instead of hiring the servants which are required for the purposes of the Institution.

"There is one other subject in every respect worthy the attention of the Legislature, which it is our purpose at present merely to suggest, deferring until another occasion, should it be necessary, the reasons which should govern their action in regard thereto. We allude to the importance of some provision being made for the proper care and treatment of insane colored persons. The last census shows, that including the insane and idiots, there were in Virginia 384, of whom 58 were free. Where these are, or what is their condition, we have had but little opportunity to learn, but know enough to convince us that many of them much need the sympathy and aid of the Legislature. No provision having been made here for the comfortable accommodation of this class of patients, we have never found it practicable to admit them, although occasional applications have been made to us in behalf of free blacks, and frequently of slaves. What is the best to be done, or whether any thing be attempted immediately, should be submitted of course to the wisdom of the Legislature. We will simply remark, that for many reasons it would be desirable that an Institution for colored persons should be entirely distinct from those occupied by insane whites; and yet as a matter of economy, it would certainly be best that they be in some measure connected; at least in so far as they might be subjected to the management and supervision of the same directors and officers. Should it be the pleasure of the Legislature at any time to make suitable provision for such in connection with this Asylum, we will most cheerfully devote our energies to promote their comfort and effect their cure."

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SOUTH CAROLINA.

This State was among the first to make provision for the Insane poor. So early as Dec. 1821, an appropriation for an Asylum was made by the Legislature. In 1822, a site for the buildings was selected at Columbia, and in 1827 they were completed for the reception of patients. Thirty-four acres of land are attached to the Asylum. The Institution is governed by a Board of Regents elected by the Legislature every six years. The State reserved the right to send pauper patients to the Asylum at \$100 a year, but this sum has been found, after long experience, to be insufficient, a fact deserving the attention of those who are attempting to reduce the price at other Asylums below even this sum.

Dr. Daniel H. Trezevant, a gentleman of ability and experience, is the Physician to the Institution, and has been, we believe, since the year 1835. But he does not devote his whole time to the Institution, and on this subject frankly states, "I have often felt, and still do feel, that it is not in my power (without neglecting my other business) to devote as much time to their cases as their situation requires."

He also alludes to the propriety of a change being made so as to vest the offices of Physician and Superintendent in one person, but the Committee of Regents do not approve of this arrangement.

We know not the whole number of patients that have been admitted into this Asylum, but Dr. Trezevant states in his last Report that "Since the year 1835, the time of my appointment as Physician, there have been received into the Asylum 233 patients; and of this number 120 have been discharged cured, 14 have been removed by their friends, and 68 have died." Present number of patients, 72.

In relation to insane colored persons, the Report states, "Your Committee have to deplore that no provision is made for the insane blacks among us; that the arrangements of the building and the means of the Board will not allow it. How far this is compatible with the principles of our en-

lightened philanthropy, they will not decide. According to the census in 1840, there were at that time 137 insane blacks in South Carolina. From reasons, to which it is not necessary here to allude, the white and colored subjects can not be associated, and any provision for this latter class will necessarily involve the erection of another building."

Dr. Trezevant alluded in his Report to a subject we do not recollect having seen treated of by others, viz: the propriety of compelling the insane to labor. His views are as follows:

"The great object, in the cure of insanity, is to arrest the attention, and fix the mind upon some subject unconnected with the insane idea; and while doing this, the general health should be strictly watched. When the different viscera resume their healthy functions, the brain will, in most cases, return to its normal state. But how is the attention to be fixed, and the mind employed? By pleasing conversation, exercise, and steady and sustained employment. It is now the custom, in the Northern Institutions, to keep the patients employed at some trade, or on the farms, and by giving them full exercise, and something to occupy the mind, they are compelled to think, and their feelings and their thoughts are diverted from the sources of misery and distraction which had shattered their intellectual powers. But what course is to be adopted with those who will neither work nor engage in amusements!

"The question is, not whether their labor is to be made profitable to the Institution, but whether it is to be of advantage to them; whether the employment of the physical man will benefit the intellectual; and that being the case I have no hesitation in saying that they should be forced. Who can object to coercion for their own benefit? Is it more than the discipline used for the sick, and the exertions children are compelled to make for their advantage? Who denies the propriety of compelling a child to learn?—of requiring him to pass hours at a dull task, so long as it exercises his mind and adds to his information? Why do we make him move

about, but to give vigor to his bodily frame, tension to his nervous system, and healthy action to his lungs, and by their influence on the blood, to develop to their fullest extent, his cerebral organs? Does any parent hesitate to make a child memorize his lessons, or exercise his limbs when disposed to be indolent? And why should there be an objection to the same course with a man?—one whom accident has deprived of his judgment, and who stands before us in the relation of a child? Why should we not compel him to use bodily exertion, and by so doing, force his faculties into action, whether he will or not? And why should we not adopt means that will arouse a new train of ideas, (even though it may be through the influence of anger) and banish the insane illusion? This can be effected with advantage to both mental and bodily health; and should we be deterred from doing it from any feeling of false delicacy or sickly sentiment? Or ought any means to be considered improper that would effect so desirable a change? Many of our patients could not be induced to work, and heretofore they have been permitted to lounge about until imbecility crept over them, and finally crushed the little intellect they had. Which is preferable, to compel them to work, or see them gradually sink into a state of helpless, hopeless imbecility?

"I should say that any means, capable of arresting this termination, and saving one being from such a state of brutish stolidity, should not only be adopted, but considered as a blessing conferred on the afflicted. Can means be devised to compel them to exertion, without using harsh or violent coercion? I think there can. We have differed in our opinions heretofore on the subject; but I still believe that it might and ought to be attempted. We need not to be tied down to one kind, but various modes of a similar character might be tried, that would compel them to action, and by action, rouse the capillary circulation, bring the skin into a healthy state, and free the internal organs from the load which oppressed them into inaction. Who has not felt the languor and oppression, and morbid irritability that assails

them from a continued state of inactivity, and how rapidly it has been dispelled by exercise in the open air? With what a glow and general exhilaration he returns, after his whole system has felt its invigorating influence? I have brought this subject again before you, and urge most strenuously that you will see to the furnishing of proper recreation to the patients, and supply them with proper work; and that you will not permit your feelings to get the better of your judgment, and prevent the establishment of such means as will furnish involuntary and compulsive labor to those who would otherwise be idle, and that it be continued until the beneficial effects render it no longer necessary."

We regret that Dr. T. has not particularized some of the means to which he would resort "*to compel patients to labor without using harsh or violent coercion.*" We can not think of any that would not be improper. We should so consider diminishing their usual supply of food, secluding or deceiving them, &c., though these means might not be deemed harsh or violent.

In concluding his excellent Report, Dr. Trezevant thus alludes to a subject that causes much difficulty in most Lunatic Asylums:

"Much dissatisfaction exists in the community at my refusal to permit them to visit their friends, while under medical treatment. I have tried the experiment, and have so uniformly found it injurious, that while there is a chance of their restoration, I never allow access. It often irritates, seldom soothes, but mostly leads their thoughts to home, where the source of the trouble is usually centered, and makes, of quiet, well-disposed and orderly patients, restless, unhappy, and violent maniacs. Another objection to their receiving the visits of their friends, is the incorrect opinion they sometimes go away with as to the treatment of the patients. Few reflect on the great change the moral feelings and perceptions undergo in the insane. Knowing that their friends were persons of undoubted veracity before their indisposition, they imagine they must remain so still; not re-

flecting that the patient, though telling what he believes to be the truth, is suffering under delusion of perceptions, and though reasoning correctly, yet he either hears, or sees, or smells wrong, and hence tells a tale not entitled to belief. This occurs in every Asylum. It often makes the friends unhappy; they promise to have the evil redressed, the patient expects a change, becomes restless under the supposed grievance. But the change never comes, for it can only be effected by his becoming better, and then he neither feels the presence, nor is even aware of the former existence of his complaint. I have often had complaints made to me of the savage conduct of a keeper on one day, and perhaps have the highest encomium passed upon him at my next visit. In both cases the patient spoke what he believed to be the truth; the difference was in his feelings at the moment. I allude to this at the present time, because I have had much trouble both with patients and friends, and some, from being refused, have gone away in anger, and threatened to remove their wards from the Institution. A physician is frequently placed in a very unpleasant situation. He knows that at every hazard the welfare of his patient is to be first considered, and his feelings are often severely tried by the importunity of friends.

"The moment they begin to convalesce, their acquaintances are anxious to see them, and often bear to their relatives a false report, productive of much mischief. Mrs. — is a melancholy instance of this. Through the foolish interposition of friends, and a want of firmness in her husband, she was removed (contrary to advice) from the Asylum, and she, who was nearly well, was shortly after returned an incurable maniac. A few moments reflection would satisfy them that neither to the Physician, nor any officer of the Institution, can their continuance be of advantage. It does not increase their emoluments, but certainly adds to their cares and their labor, and self-interest alone would prompt them to expedite the cure as much as possible."

GEORGIA.

The only knowledge we have of an Asylum for the Insane in the State of Georgia is derived from a pamphlet of 71 pages, published the year past, at Milledgeville. Its title is as follows: "First published Annual Report of the Resident Physician of the Lunatic, Idiot and Epileptic Asylum of the State of Georgia. To His Excellency, Geo. W. Crawford, Governor; Doctors T. Fort and B. A. White, Trustees. Comprising its origin, progress and present state; its fiscal concerns, and a detailed account of patients admitted; their symptoms, or states of derangement, treatment, &c. &c. &c. By David Cooper, Resident Physician and Trustee. Milledgeville, Ga., 1845."

After reading this Report, we still had doubts respecting an Asylum for the Insane in Georgia—as, for reasons which will hereafter be obvious, we could scarcely believe this Report to be genuine. We could not at first believe that any Board of Trustees, together with the Governor of the State, to whom it is addressed, could ever have sanctioned the publication of such a singular document. But to our surprise we learn that this is a veritable Report of the Lunatic Asylum at Milledgeville. But it is such a confused medley of facts, and reasoning, and unusual words, that we find it difficult to learn much of the actual condition of the Asylum. To make good this assertion, we add the following from page 9. Intending, we believe, to illustrate the fact that suitable provision for the insane poor of the State would lessen the burden of the tax-payers, he says: "In a pecuniary and politico economical point of view, it will be to our financial interests, the Archimedian lever to oscillate the incubus beam of deranged, and depressed fiscal oppression which has shed its blighting effects upon the monitary affairs, and financial operations of the State Treasury for so many years, by lightening, the onerous burthens of Taxation from the shoulders of the poor and destitute, and afford bread to those who are ready to perish; these are not analogical suppositions and without veritious foundation, or

demonstrable illustration, but susceptible of proof by the introduction of a few prolegomious deductions, and the aid of a few arithmetical prolepses."

If we rightly understand this Report, the Act authorizing the building of a State Lunatic Asylum passed the Legislature Dec. 1837; that a site was soon after selected two miles south of Milledgeville, 40 acres of land purchased, and a plan for a building adopted. The plan proposed was, in the language of the Report, "that of two buildings, each of 4 stories high, 129 feet long and 39 feet wide, parallel to, and distant from each other 222 feet, this 222 feet designed to be the foundation of another, or third building, reaching from the outer corner of each of the 2 first, covering the whole space from outer corner to outer corner, constituting this third building 300 feet in length and to be 40 feet in width, its ends where they join to the ends of the other buildings, are to be Verandas."

After expending \$45,000, one of the wings was completed, and opened for patients Nov. 1, 1842, the men being kept in 1st and 2d stories, and women in 3d and 4th stories of same building. The first year 10 patients were received, and at the end of this time we believe Dr. Cooper was appointed Resident Physician, and his Report relates to the cases in the Institution the 6th Nov., 1843, (four in number,) and 29 admitted from that date to Nov. 1, 1844. Total of all the cases, 33. Of each of these Dr. C. has given a minute account without regard to their presenting anything unusual or interesting.

Had the cases been interesting or instructive, and described in a proper manner, we should still have thought the practice of presenting his case book to the public very improper,—but they are described in a style altogether unprecedented and ridiculous. Take for instance the following:

"Case 13th, Mr. —, from — co. Ga., Lunatic for 9 years, pauper, aged 45; Sanguineo billious temperament; married and farmer, admitted into the Institution 23rd March 1844, for many years this subject had been a devout mem-

ber of the Presbyterian church, filling the station of delegate to conventions, presbyteries, &c., and enjoying the utmost confidence of his brethren, sustaining all the social relations characteristic of a kind neighbor, and affectionate husband and father without (as his brothers say in a letter to me) any ostensible cause for derangement, unless it proceeded from his devotion and enthusiasm. His attack was preceded by and accompanied with almost an entire abandonment of all other pursuits and an apparent indifference to the interest of his family, visiting churches, attending religious meetings, &c., till his conversation and actions began to exhibit so much incoherence as to demonstrate incipient insanity, his acts of devotion were attended with a want of solemnity, or too much facetiousness, his prayers lacked inspiration and savored of irony, his family (not over discriminating and intelligent,) endeavored by advice to restrain him from devotion, family prayer, fireside lecturing, &c., and from attending religious meetings, this offended him, he chid them "that God's authority was above all other, he acted under his inspired authority and direction," "we must pray always constantly, &c., even to the neglect of all temporal concerns and provision for the wants of the body," his family's reasonings against this course aided by neighbors, exasperated him, he threatened them, exhibited evident indications of violence and homicidal impulses, became furious and ferocious requiring restraint upon his athletic body and superior physical powers, this was resorted to, and he confined with a chain to his leg and iron hand cuffs and chain, and for nearly 9 years he was kept in this situation and stapled to one spot most of the time, and with these chains, handcuffs and staple driven into the bolster of his cart, he was brought to our Institution, 150 or 175 miles under guard of 2 men, with his feet very much swollen, particularly from the chaining, and with one eye out which in one of his furious, frantic and ferocious fits of disrupted, dethroned reason, he had torn from its socket in obedience to the gospel command, "if thy right eye offend thee pluck it out." This disfiguration re-

mains a monument of the demoniac and legionized state into which the mind may be thrown by excess, though the germinations of that excess, are the impulses of inspirations and religion; thus situated, he entered our Asylum, having had two furious paroxysms in the cart on the way. We gave him a comfortable room, bedding, &c., but with his handcuffs and chains as we received him, placing a staple in the middle of the floor, this confinement he expostulated with us to resort to, as a protection to ourselves and him from violence, tho' now exercising this much reason, cool, mild inoffensive and projecting means of prevention against injury, in less than six hours he was as furious as a tiger and roaring like a lion, and to be heard half a mile, cursing, stamping, clanking his chains, anathematizing and menacing all who passed in the yard, both inmates and servants, and anon passed into a silent or dumb deeply meditative state, in which his eye was fixed upon an object steadfastly for half an hour, this latter no means could divert and it is a symptom which frequently takes place without being preceded by the furious paroxysm. The above may be considered a description of his furious stage, tho' it has sometimes been much severer and more protracted than at others; the countenance and gestures in those fits do not admit of description. Between these exacerbations which are not periodical, but used to occur every day or two, since every week or 10 days, but recently much more seldom, he is quite rational, mild, sociable and affable, conversing freely on different subjects, state of the weather, prospect of the crops, price of cotton, news, politics, and religion to excess if encouraged, reads newspapers and other miscellaneous works, sometimes the Bible and Hymn book, tho' they injure him; sleeps well and his dreams are pleasant, tho' very different when he came in, talks of his family with affection, reads their letters with pleasure, tho' he says he used to wish to kill them, particularly his infant, he enjoys excellent health especially since we have released him from his chains, (which he would not permit us to do for 6 months for fear of former violent impul-

ses, homicidal and suicidal dispositions,) and permit him to walk daily at liberty in the promenade passage in the fourth story of the building, a situation well calculated to inspire rational thought, variegated contemplation, and amuse his mind, and chase away from its melancholy reminiscence those corroding reflections which too generally harrass the convalescent from insanity till he has acquired his former rationality; as from its elevated site the eye embraces a commanding and picturesque view of the village of Midway, ornamented with its female Academy; its preparatory school; its female literary Institute; but more elegantly and tastefully ornamented by Oglethorpe University under its able faculty, the President and Professors; and from which are destined at no distant future day to radiate in her alumni, perennial streams of literature, science, moral worth and piety, which shall adorn the walks of civil life, vie with successful competition with the foremost in the ranks of the learned professions, and chain in breathless silence listening multitudes, with their fervid, pious pulpit eloquence. In radiating the eye north from the key stone arch of this classic literary and scientific culmination, the city of Milledgeville, (tho' two miles distant) presents in amphitheatrical variegation, its tumulous mausolea, its sacred fanes, upon the altars of which is duly offered up by the Clergymen of the Episcopal, Presbyterian, Methodist and Baptist churches, and perennially burns enough of holy incense and sufficiently redolent of the blood of atonement to expiate all the turpitude, crime and guilt of its citizens, and in beautiful and bold relief within their circling embrace and audible distance as if by their proximity and holy emanations, to obtund the acrimony and quell the discordant elements of political strife, within its capacious stuccoed walls so ornamentally decorated with the likenesses of the master spirits of the age, Washington, Jefferson, Franklin and La Fayette, stands the Capitol of Georgia, rearing its elevated dome, proud cupola and cloud capped and pinnacled Franklin, around whose

mains a monument of the demoniac and legionized state into which the mind may be thrown by excess, though the germinations of that excess, are the impulses of inspirations and religion; thus situated, he entered our Asylum, having had two furious paroxysms in the cart on the way. We gave him a comfortable room, bedding, &c., but with his handcuffs and chains as we received him, placing a staple in the middle of the floor, this confinement he expostulated with us to resort to, as a protection to ourselves and him from violence, tho' now exercising this much reason, cool, mild inoffensive and projecting means of prevention against injury, in less than six hours he was as furious as a tiger and roaring like a lion, and to be heard half a mile, cursing, stamping, clanking his chains, anathematizing and menacing all who passed in the yard, both inmates and servants, and anon passed into a silent or dumb deeply meditative state, in which his eye was fixed upon an object steadfastly for half an hour, this latter no means could divert and it is a symptom which frequently takes place without being preceded by the furious paroxysm. The above may be considered a description of his furious stage, tho' it has sometimes been much severer and more protracted than at others; the countenance and gestures in those fits do not admit of description. Between these exacerbations which are not periodical, but used to occur every day or two, since every week or 10 days, but recently much more seldom, he is quite rational, mild, sociable and affable, conversing freely on different subjects, state of the weather, prospect of the crops, price of cotton, news, politics, and religion to excess if encouraged, reads newspapers and other miscellaneous works, sometimes the Bible and Hymn book, tho' they injure him; sleeps well and his dreams are pleasant, tho' very different when he came in, talks of his family with affection, reads their letters with pleasure, tho' he says he used to wish to kill them, particularly his infant, he enjoys excellent health especially since we have released him from his chains, (which he would not permit us to do for 6 months for fear of former violent impul-

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apex like its projector, the electric fluid has darted its scintilla and flashing corruscations for thirty seven years without scathing or injury, tho' hard by stands the Government arsenal, stored with the attractive metal of fire arms and the inflammable deposit of gun powder. From this elevated situation in our Institution, the eye embraces an entire view of the whole city and prominent residences in the vicinity, comprising the splendid edifice, the Governor's residence, the Court House, the Masonic Hall, the county prison and house of correction, or State Penitentiary with its elevated octagon dome cacuminating cupola and aspiring Franklin, vieing in attitude and pre-eminent conspicuousness, with any of the most prominent in its vicinity. Not among the least attractive scenes to the eye of the spectator from this elevation in our building may be enumerated the view of the Oconee river, the rapid descent of which is dashed into innumerable murmuring rills, splashing currents, and swelling torrents, chasing its shores by the resilient influence of the huge and anfractuons rocks composing its rapidly decadent bed above and opposite the city. From this situation our patient is frequently invited and accompanied down into the walk yard between the two buildings, and associates freely and harmlessly with the other male inmates apparently much pleased and gratified with the fine exterior appearance of the building, and enquiring, "how much did it cost?" and seldom has a paroxysm and but very slight being quite controllable. The medical treatment in this case has admitted of, or required but little variation, (except such as was necessary for the cure of his dysenteric affection in the spring) and comprised the nauseant, aperient and shower bath course, with occasional anodynes, and our uniform mild, soothing and conciliating conduct and conversation, especially to cheer and console him, when dejected and despondent, some contributions to which objects have been afforded by letters received from his family assuring him of their fine crop, comparative prosperity and prospects of visiting him this fall."

When the reader has perused this, and is assured there are 32 more very similar, he will agree with us that nothing but disgrace to the writer and the Institution he conducts, and in fact to all similar Institutions in our country, must follow from such a Report being made public. We do not know Dr. Cooper;—from some things in his Report we judge him to be a man of kind feelings and one who wishes well to those unfortunate persons under his care—but we must in all kindness remonstrate with him and strenuously urge him never to publish another Report of the kind, and none whatever until after submitting the whole of it to enlightened, discreet and fearless friends, and obtained their unanimous approval.

KENTUCKY.

There is a State Institution for the Insane beautifully located about one mile from the city of Lexington. It was opened for the reception of patients in 1824. It seems to have been designed for the safe keeping of patients rather than their cure, and can hardly be said to have been a curative establishment until recently. Whole number of patients admitted from 1824 to Dec. 1844, 1128; of this number 404 recovered, 416 died, (43 by Asiatic Cholera,) 93 eloped, and 32 removed. Present number, 163.

Previous to 1843, the medical department was confided to a young man at a salary of \$150 per annum, but so great were the complaints respecting the treatment of patients at the Asylum, that the Managers were induced to change its organization and to appoint a Resident Medical Superintendent. Fortunately they selected Dr. John R. Allen, of Greensburg, for that situation, who has entered upon the discharge of his duties with much zeal, and has made many improvements and proposed others, and in a few years, aided by a generous Legislature, we expect to see the Kentucky Lunatic Asylum take rank among the good curative establishments of the country.

OHIO.

The Ohio Lunatic Asylum, at Columbus, is a State Institution, and was opened for the reception of patients Nov. 30, 1838. It was built chiefly by the labor of convicts, and is supported by direct annual appropriations from the State Treasury. Fifty-seven acres of land are attached to it. Since it was opened, in 1838, to Nov. 1844, the whole number of patients admitted is 541, of which number 243 recovered and 58 died. Present number of patients, 148.

The Asylum has been full for several years, and applications for admission necessarily rejected for want of room, have been so numerous, that the Legislature, with a praiseworthy liberality, decided in the winter of 1842 to enlarge the building by the addition of extensive wings so as to accommodate 100 patients each. One of these wings is about completed, and the other is to be in the summer of 1846. With these additions, this Institution will afford accommodations for 345 patients.

Dr. William M. Aul is the Superintendent of the Asylum, and has been ever since its organization—in fact we consider him the founder of the Institution, as owing to his exertions, aided by his medical brethren in convention in 1835, the Legislature of the State were induced to make appropriations for its establishment. This Asylum takes rank with the very best in the country, and affords an example for the surrounding States to follow.

TENNESSEE.

The Tennessee Lunatic Asylum, established in 1841, at Nashville, is, we believe, a State Institution, and capable of accommodating 100 patients. We have seen no published Report of this Institution, but learn from friends who have visited it, that it is not made a comfortable place for the Insane. It has no Resident Physician, but a medical gentleman of the city visits it twice a week. We do not know the number of patients, but understand the Institution is not full.

The States of North Carolina, Louisiana, Alabama, Mississippi, Missouri, Michigan, Indiana, Illinois and Arkansas are as yet without a Lunatic Asylum.

We have thus, at considerable expense of time and labor, been enabled to present our readers with an account of the origin and present condition of the Lunatic Asylums of the United States. The space occupied has been greater than we intended, and we can not afford room but for a few additional observations.

We trust that no State in the Union will long be destitute of an Asylum for the insane poor—an Institution controlled by the State. This is essential to secure the proper care of that deplorable yet increasing class of Lunatics that have been acquitted of crime on account of insanity. The courts of every State frequently acquit such—but where there is no State Asylum they are sent back to jail with criminals where their situation is often wretched in the extreme.

For instance, in the State of Connecticut, about ten years since, a man was acquitted of a high crime on the ground of insanity, and remanded to jail by the court according to law. Subsequently a law was passed by the Legislature for this insane man to be removed, though not as a criminal, to the state prison, where it was thought he would be more comfortable than in jail. He has remained in the prison since then, usually in a small cell, and most of the time a raving maniac. The late intelligent physician to the prison and other medical gentlemen who often saw him, were of opinion that he would have recovered had he been placed in a good Lunatic Asylum.

The Legislature of Connecticut, with most commendable liberality, has made, and is annually making large appropriations for the relief of the Insane of that State;—why then is this unfortunate and well educated foreigner permitted to linger out his days in the prison? Solely, we suppose, for the want of a Lunatic Asylum controlled by the State. We hope the next Legislature will see to this, and no longer per-

mit what, if continued, will be a stain upon the character of that generous State.

The location of an Asylum for the Insane is a subject of much importance. It should be central, and in the neighborhood of a city or large village. It should, however, be at least one mile from the settled part of the town. But no location is a good one unless there is an abundance of good water in the vicinity that can easily be carried into every part of the establishment. The main building should, we think, front to the south, and be placed one fourth of a mile from the common road, and very remote from all other roads. In the rear should be a good farm, at least one hundred acres, even for a small number of patients, that they may have grounds for labor, exercise and amusement, where they will not be intruded upon by visitors. Pleasant walks should be made through the grounds, and if no groves, numerous trees should be planted.

The buildings should be of durable materials, and built in the best manner. Great pains should be taken in laying the foundations, and in constructing the drains and culverts. As the plastering inside is directly on the walls of the rooms occupied by the patients, precautions should be adopted to prevent such rooms becoming damp in long continued wet weather. This we think can be done, by building the outer walls double, each eight inches thick, with a space of two inches between, bound together by occasional bricks, and the outer wall should be laid in water lime or cement.

To prevent the transmission of sound from one story to the other, the space between the joists should be filled with a course of bricks and mortar, resting on boards fastened near the bottom of the joists. This not only prevents the transmission of sound, but is a security against fire.

Every Institution for the Insane should have we think a Superintendent who should be a Physician, reside in the building, and under the direction of the Managers be its responsible head. Residing in the neighborhood, however

near, we think less desirable for his own comfort and the good order and welfare of the establishment, than in the building with his patients, whose condition he can then readily know at any moment.

Our views relating to numerous other particulars, such as the proper size of an Institution, its internal arrangements &c, we must defer to another time—but we cannot close this article without calling attention to the Annual Reports of the Institutions for the Insane in the United States, and commending them to the notice of all those engaged in the study of insanity. With few exceptions they are interesting and valuable documents. In some respects we think they may be improved, by omitting useless details and avoiding topics that interest but a few; and especially do we think that tables which state on the same line the *cause* of the disease with the date of admission, sex, age, &c, thus enabling those acquainted with a patient to know all these particulars relating to the case, very objectionable. We know of some instances where the feelings of relatives have been much grieved by such a public exposure—and that such must often be the case is evident by looking at the *causes* assigned for the disease in some of these tables. No possible good can result from these lengthy tables, as the same facts can be generalized and presented in a better and unobjectionable form.

ARTICLE V.

"JOURNAL OF PRISON DISCIPLINE," AND LUNATIC ASYLUMS.

To the Editors of the American Journal of Insanity:

GENTLEMEN,—I observe in one of the numbers of your valuable publication, you deprecate "the juxtaposition of Institutions so dissimilar as Prisons and Lunatic Asylums in Prison Discipline Journals," as doing "no good, but on the contrary much evil."

Will you allow a friend to Reform in Prison Discipline to state the other side of that question, and in all kindness, to inquire whether your zeal for the insane has not caused you unwittingly to contract somewhat your otherwise enlarged benevolence?

The juxtaposition of which you complain may indeed, as you suggest, "tend to perpetuate the erroneous notion that Asylums for the Insane are prisons, and that it is a disgrace to be placed in one." But is that an enduring evil? Is it doing, or can it do much harm?

So far as our public authorities are concerned, it has had no injurious tendency, for they have already made provision, in the Institutions at Utica, Bloomingdale and Blackwell's Island for nearly 1000 of the insane, or one third of the whole number in the State. So far as concerns the friends of the insane, it has not had much effect, for all those Institutions are crowded with inmates, and several private establishments well sustained. And so far as the patients are concerned, it is an impression removed at once, and most easily, by a few days' residence.

——— Look at that picture :

Now on this, ——

They are kindred subjects, as all must acknowledge, who believe that the moral as well as the intellectual faculties can be deranged by accident or disease, and while the latter fills the Asylums, the former crowds our Prisons.

Insanity is often a cause of crime and a shield against punishment for its perpetration, and therefore the criminal lawyer must know as well the learning of insanity as of the law.

But most of all, is the divorce you aim at to be avoided, because the errors which so long clouded the general mind in regard to the deranged, still, in a great measure, cast their gloomy shadow over the criminal. And the violence, the cruelty, the chains, the whips, the dungeons which were once the maniac's fate are still defended, justified and prac-

ticed in almost all our prisons, and with effects almost as blighting and destructive in the one case as in the other.

No argument is so forcible, no appeal so effective, in the mouths of the friends of Prison Reform, as the triumphant success which has attended the efforts of philanthropists on the cognate subject.

It is the triumph of love over force, of kindness over cruelty, of reason over the selfish passions. To the same source do the advocates of Prison Reform look for their ultimate triumph.

Do not, then, utterly cast them off. Let them profit by and appeal to your example. And you, who have succeeded so well in producing the fruits of Christian Love amid the ruins of the intellectual faculties, lend your aid in planting its seeds amid the desolation of the moral; and it can not be, in the very nature of things, but that the same happy results must follow. * * *

We give place to the foregoing communication from a distinguished jurist of this State with pleasure. The learned gentleman altogether misapprehends us in supposing we desire to cast off imprisoned criminals. Quite the contrary is the fact. We consider them for the most part objects of pity—the unfortunate inheritors from nature of tendencies to error, which instead of being repressed by proper education, have been strengthened by their social condition and the neglect of society. Most cheerfully would we unite with others in any practicable and reasonable measures to reform them and improve their condition.

We spoke of the course of the Prison Discipline Journal as we did, not that we wished criminals to be neglected, but because classing them with the insane in such a journal would do *them* no good and the insane much harm.

He can be but little conversant with Lunatic Asylums and with the insane and their friends, who does not know, that even now the prejudice against such establishments is very great,—that they are regarded by a large part of the unenlightened portion of the community, as prisons and dun-

geons, where men and women are confined in cells, chained and abused. It is this prejudice that has caused the large number of incurable cases of insanity in the country. Their friends have kept them at home until the period for cure has passed, for fear of Asylums. Were these Institutions rightly appreciated by the friends of the insane and the community, there would not be, as is now the case, here and there one, affording accommodations but for a small part of the insane, but they would abound in all parts of the country, and no one, likely to be benefitted by a residence at an Asylum would be long kept out of it. To produce such a result by changing the opinions of many in the community we feel it our duty to strive, and to oppose whatever is calculated to retard the progress of correct views and right feelings on this subject.

In our view, accounts of the insane and of Institutions where they are placed, in a Journal that, judging from its title no one would suppose treated of other subjects than Prisons and Criminals, will tend to increase and perpetuate the erroneous opinions we have mentioned.

Besides much is due to the feelings of the insane. They are grieved and reasonably so, to see the Institution where they have been placed ranked with Prisons, and themselves apparently catalogued with a class of persons that neither they nor the community regard with the feeling of commiseration that our benevolent and enlightened correspondent does.

Still we would not object to the course alluded to, if it was servicable to criminals; but it has no such effect, on the contrary by occupying the space in the journal that should be devoted to making known their wants and claims, much less good will be accomplished in their behalf than it was reasonable to expect from such a periodical.

We rejoiced when we heard of the establishment of a Prison Discipline Journal at Philadelphia. We believed it would do much good, and hoped it would avail itself of that flood of light, if we may so say, that has been thrown upon

the whole subject of crime, criminal legislation and prison discipline by physiology and phrenology—sciences that have shown the relation between the physical constitution and the mental and moral faculties. In our opinion the principles advanced in the works of Gall, Spurzheim, Combe, Simpson, Sampson, and others of that class, and the practical excellence of those principles, as exhibited in several Institutions in other countries, ought not to be overlooked by a Journal devoted to the improvement of Prison Discipline.

The writers alluded to have in our opinion indicated the plan to which we may now look with great hopes of good results. In this opinion we are confirmed by a recent letter from one, who by her own personal exertions and sacrifices, has effected a great improvement in one of the largest prisons in our country. We refer to Mrs. Farnham, of Sing-Sing, who says, "In reply to the question whether in my efforts for the reformation of criminals I have been guided by the laws of relation between mental manifestation and physical developement? I answer *emphatically, yes*. A knowledge of and adherence to those laws, have been the foundation of whatever success has attended my efforts."

As already stated, we consider criminals for the most part, an unfortunate class, whose physical organization is defective, which disposes them to a vicious course. With them the influence of the higher faculties of the mind is small, while that of the propensities is naturally great.

If therefore the cultivation of the former is neglected, the animal propensities gain the ascendancy and direct the conduct. It is this class, who have been thus neglected, who are ruled by their passions and sensual propensities that furnishes nine tenths of our criminals. For the prevention of crime therefore, recourse must be had to the *education of all the youth*. Ignorance, the want of mental and moral culture, is the most prolific source of crime. Thus we find in Connecticut that about *one fifth* of the convicts were unable to read when committed, and all extremely ignorant, yet we rarely find an individual in Connecticut who cannot read.

Nearly *one quarter* of the convicts are blacks without education, yet the proportion of the colored population to the white in that State is but *one to thirty-six*.

By the neglect of intellectual and moral cultivation the sensual propensities acquire a fearful preponderance, and the gratification of these, constitute the only happiness of this class of individuals. To satisfy the demands of these propensities they transgress the laws of the country, are arrested, convicted, and sent to prison. How can a criminal thus circumstanced be reformed?

We are of the opinion he cannot be forced into reformation by the infliction of physical pain and suffering, but if at all by leading him *to will* to amend, by inducing him to reform himself, by calling into activity his intellectual and moral powers, and quieting his animal propensities. Such an individual though living in the midst of a civilized community, is to a considerable degree in the condition of the uncivilized savage, unaccustomed to the control of his passions and lusts, and ignorant of any enjoyments but those that are debasing and sensual. The only hope of reforming such an individual is by making known to him higher and purer enjoyments, and rendering him less brutal and sensual. Unquestionably hard labor and plain food, tend to lesson for a time the force of sensual impulses, but they do no more, they change not the moral nature of the criminal, they furnish him no new tastes or propensities, nor any additional power to resist the calls of appetite and passion when released from the Prison.

But we are told that when the criminal is left in the solitary cell, he will then 'feel the pangs of guilt,' and, 'be compelled to listen to the reproofs of conscience;' and by reflecting on his past bad conduct be led to repentance and reformation. If this was correct it would be exceedingly gratifying; we have therefore endeavored to ascertain if such is often the case, and are fully satisfied it is not, but that a criminal thus left to his own reflections will grow worse instead of better. If a person however, in whom the moral

faculties were generally active, was to commit an offence that subjected him to imprisonment, undoubtedly this would be the result. That some such are imprisoned and become reformed we have no doubt, but in the generality of convicts the moral powers are too weak to produce remorse. As the Chaplain to the Connecticut Prison remarks in his Report, 'most convicts are not only ignorant but exceedingly sensual. Their prevailing thoughts are sensual. They spend hours together in the silence and solitude of their cells, forming in their minds pictures of those acts of sin and crime to which they have been and are still most inclined, and by this mental process render themselves more ripe for outward acts of transgression when they obtain their liberty.'

The power of conscience in most criminals appears to be trifling. During a long career of crime, and most criminals confess they have been guilty from youth of petty offences, it had not been exerted, and now when in prison does not disturb them. They do not in fact feel very guilty. They cannot be made to realize that they have been great transgressors, even when convicted of the most heinous crimes. But the mind naturally reverts in solitude to pleasing recollections. Remorse cannot long be endured. To what then can the thoughts of such men revert when in prison but to sensual reminiscences. They have no fund of ideas that their minds can dwell upon, but what is connected with their former sensual enjoyments. They are in general men of narrow intellects. Either from natural endowments, or from want of early education, they constitute in fact, a distinct and peculiar class, an unfortunate class of beings whose mental powers are inferior to the generality of men, but whose passions and animal propensities are stronger. A want of caution is also a general characteristic.

Hence we find that though they leave the Prison, firmly resolved never to transgress, they soon, and as it were almost instinctively, seek a criminal course, and usually recommit the *same crime* for which they have just suffered se-

vere punishment, and so incautiously that they are again immediately detected. Conscience, reason, experience, suffering in Prison, all appear to be impotent when arrayed against their impetuous impulses and passions.

Were it possible to reform such men, it would require a long course of correctional education. Mere confinement will not do it; their minds must be improved, new desires must be created, new impulses awakened, and they be made to realize there are other enjoyments than the sensual. Of many criminals, especially these long addicted to vice, we have but little hope even from this course. But of the young we have.

We should confidently expect the reformation of many by a proper course of education, though we are fully convinced that the organization of some criminals is so defective, that there is little or no hope of their being so reformed as to render it safe for society to have them at liberty.

Guided by these views which we have heretofore advanced, and which considerable observation of criminals while a Director for several years of the Connecticut State Prison, and subsequent reading and reflection have tended to confirm; we can not but regard the controversy between the advocates of the Auburn and the Philadelphia system of Prison Discipline as trivial, and unfortunately tending to divert the attention of many excellent persons from seeking one better than either.

"The greatest evil, perhaps," says Condorcet, "that can be done to truth, is to force those who love it to form a sect." We fear that many good men who are sincerely desirous of the improvement of criminals, are likely to be *forced* to join one or the other of these parties. We regard both the Auburn and the Philadelphia system as good in some respects, and in others, as lamentably defective. Both, we think, have failed, so far as the reformation of criminals is concerned. The few reforms that have occurred seem to us to be accidental, not the result of the system; or they have occurred among that class who have been guilty of crimes against

persons, a class far more likely to reform under any system than those who have committed crimes against property.

But we have not time or space to enlarge upon the defects of these noted systems, nor to particularize a better, and we owe an apology to our readers for this long dissertation on a subject foreign to the important one to which our Journal and ourselves are devoted.

We wish however in conclusion, briefly to state that we hope hereafter to see, in the construction of Prisons, means provided for the classification of prisoners. We would have at least three distinct buildings for as many classes. One might be on the Philadelphia plan—another on the Auburn, and a third constructed for the more hopeful and reformed class, in which *schools* should be established where those of this class could associate together under the constant supervision of teachers. We believe that no harm, and much good would result from thus associating them,—it would be necessary, we think, to prepare them for society and to counteract the undue influence of the selfish feelings. But no arrangement will be of avail, if the right spirit does not exist in those who have charge of such Institutions. The spirit of kindness and sympathy, such as is seen, or ought to be seen in Lunatic Asylums, should prevail in all. In fact, we think a Physician of high character, and of ability and experience, should be the leading officer in such an establishment.

But we are full of hope on this important subject. In all civilized countries, attention is now directed to it. Abroad, the success of Captain Maconochie with the prisoners at Norfolk Island, and of "La Colonie Agricole et Penitenciaro de Mettray," in France, and of similar Institutions in other parts of Europe; at home our houses of refuge, the organization of the *Prison Association of New York*, and the appointment of a committee at the last meeting of the Prison Discipline Society at Boston, to investigate the merits of the Philadelphia system, encourage us to believe that the best method of treating criminals will, before long, be ascertained and adopted.

BIBLIOGRAPHICAL NOTICES.

The continuation of the Review of Taylor and Guy is unavoidably deferred until the next number. The writer of that Review in the last number, had not seen the following notice by Prof. Lee when his manuscript was sent to the Editor :

"N. B. Those who have purchased some of the early copies of the American edition of Guy, may have observed on the top of the title-page the following significant words : '*The latest and best work on Forensic Medicine.*' Now, though we are not called on to say whether this be true or not in our judgment, wishing to leave this to be decided by the impartial reader, we nevertheless owe it to ourselves to state, that the title-page aforesaid is a spurious one, with which the editor had nothing to do—not having seen it till published, and for which the original proprietor alone is responsible. The editor feels no disposition to blazon forth his performances on a title-page, nor to forestall public opinion by an imprimatur, which may possibly be reversed at the same tribunal. Editors who notice the work, should such copies be sent them, will please bear this explanation in mind—the true title of the work being prefixed to this article, and is as follows : '*Principles of Forensic Medicine.* By W. A. Guy, M. B., Cantab. Prof. of Forensic Medicine, King's College, Lond. : Physician to King's Coll. Hospital, &c. First Am. Edition, with notes and additions. By CHARLES A. LEE, M. D., &c. 8vo. pp. 711. Harper & Brothers. New York : 1845.' "

Practical Notes on Insanity. By JOHN BURDEETT STEWARD, M. D., F. R. C. of Physicians, &c. 12mo. pp. 122. London : 1845.

The author of this little work was for ten years Physician to the Droitwich Lunatic Asylum, Worscestershire,—

a small licensed house having about fifty pauper, and half as many private patients. We suppose this work contains the results of his experience at that Institution. We however discover nothing important or new in it, and are not aware that there was any call for such a book, as we scarcely know of any modern work on Insanity that does not contain more valuable information in half the number of pages. The best thing we notice in it is the following, relating to the symptoms of approaching Insanity:

“The premonitory symptoms may be divided into two classes, viz: those evincing a predisposition to mania, and those characterizing its approach.

“In the former class, we have, hereditary tendency—great natural timidity—a disposition to view all the occurrences of life through an exaggerated medium, leading, of course, to unwarrantable depression and equal elevation, from slight and insufficient causes—a highly sensitive or quick and delicate feeling.

“In the second class, or those symptoms portending the approach of insanity, stands first, insomnia, or indisposition to sleep; restlessness; unusual irritability and excitability, with angry feelings and expressions, without sufficient cause; the abandonment of former habits; evident inability to follow any fixed or usual pursuit; suspicion and an unfounded dread of evil; avoidance of Society; occasional self colloquy; a watchful, yet averted eye.

“This combination of symptoms is not however immediate. At first, a change is noticed, in the manners and habits of the individual, which scarcely calls attention; it is felt rather than observed, and seldom elicits—at least from the friends—further remark, than that their friend or relative is, somehow or other, very much altered lately; but without the most distant idea of the nature of the alteration. Gradually this alteration becomes more evident; some or all of the symptoms above enumerated are observed; the sufferer is impatient of contradiction or control: he views every act

and word through a jaundiced medium; he suspects all around him; resists all efforts to pacify him;—daily, more and more he develops his true feelings; the caution which for a time has restrained him, gradually diminishes; he takes less and less care to conceal his opinions and impulses,—till at length, the change becoming too evident to admit of doubt, the relatives or friends interfere, the individual feels himself as it were, detected; and, confident in the truth and justice of his opinions, he no longer hides but defends them.”

MISCELLANY.

MARRIAGE OF AN EPILEPTIC—MURDER COMMITTED BY HIM
ON THE SAME DAY.

Francis Sevieil, aged 20, a shoemaker, had for a number of years been subject to attacks of epilepsy. They commenced from a fall on the ice. The paroxysms, which at first were attended with only slight aberrations of reason, gradually became more serious, and were accompanied with furious mania.

He had served in the 5th light troops from 1838 to 1841, and when off duty, pursued his trade. When attacked during this period, he would seize his hammer, knife, or any instrument at hand, and brandish it in a threatening manner, thus subjecting himself to the jests of his comrades.

When discharged, he returned and determined to marry. The ceremony with his affianced was fixed for the 26th of October, 1841. On the 24th, severe pains of the head came on, and which seemed to him an indication of an approaching attack. He called on the physician, who had secretly treated him for the complaint, and asked that he might be bled—an operation from which he had always derived relief. The physician declined, on the ground that this

remedy should not be too frequently employed. On the 26th, a few hours before the marriage, he was bled by another physician, but without any diminution of the pain.

During the civil, as well as religious ceremonies of the nuptials, Sevieil was sedate and taciturn. He said nothing beyond the simple yes. On leaving the church, he was seized with most excruciating pain in the head, and this was so overpowering, that at the house of his father-in-law he was obliged to go to bed. The room in which he lay was adjoining that in which the nuptial dinner was spread. Here he was seized with a fit of furious epilepsy, and while the persons with him had run out to obtain ropes to bind him, he rushed naked into the dining room, with a shovel that he had snatched up, pursued a female, who fled from him, and knocked her down with a blow on the head. His father-in-law interposed, but he in turn with others, were chased. He then sat down on the ground before the door, grinding the pebbles with his teeth, and finally standing up with a shoemaker's knife in his hand, he burst open the door, exclaiming, that he must kill them all. The first person that he met was his father-in-law, and whom he killed on the instant.

This attack continued for three days, so that they had to confine him in a sack. On the 29th, reason returned, but he could only remember the marriage—nothing subsequent—and supposed that he had slept since that time. He was soon transferred to the Asylum at Clement, where he still remains.

Under these circumstances, the guardian of Sevieil applied to the Court, for a declaration of the nullity of the marriage, on the ground that the epileptic was not at the time in his sane mind, and could not therefore give a proper consent.

The counsel in favor of this, urged strongly the idea, that attacks of epilepsy are always preceded by gloom and taciturnity, and that the headache was a further proof that the mind was already in a diseased state.

The presumption at last was in favor of mental alienation at the moment of the ceremony.

The Court decided for the nullity of the marriage.—*Gazette Des Tribunaux*, January 7, 1845. T. R. B.

CASE OF LORD FERRERS.

Every student of the subject of Medical Jurisprudence of Insanity, is familiar with the case of Lord Ferrers. And it was therefore with no little interest that I perused the following, in a work entitled "*Literary and Miscellaneous Memoirs, by J. Cradock* ; 8vo. ; London ; 1826 :

"I still," says he, "retain a strong impression of the unfortunate Earl Ferrers, who with the ladies Shirley, attended Leicester Races, and visited at my father's house. During the early part of the day, his lordship preserved the character of a polite scholar and a courteous nobleman, but in the evening, he became the terror of the inhabitants, and I distinctly remember running up stairs, to hide myself, when an alarm was given, that Lord Ferrers was coming armed, with a great mob after him. He had behaved well at the ordinary ; the races were then in the afternoon, and the ladies regularly attended the balls. My father's house was situated midway between Lord Ferrers' lodgings and the town hall, where the race assemblies were then held ; he had, as was supposed, obtained liquor privately, and then became outrageous ; for from our house, he suddenly escaped and proceeded to the town hall, and after many most violent acts, threw a large silver tankard of scalding negus among the ladies ; he was then secured for that evening ; this was the last time of his appearing at Leicester, till brought from Ashly de la Touch to prison there. It has been much regretted by his friends, that as Lady Ferrers and some of his property had been taken from him, no greater precaution had been used with respect to his own safety, as well as that of all around him. Whilst sober, my father, who had a real regard for him, always urged, that he was quite man-

ageable, and when his sisters ventured to come with him to the races, they had an absolute reliance on his good intentions and promises. Let this recollection be compared with all that passed previous to the last horrid catastrophe."

T. R. B.

INSANITY IN CANADA.

According to the Census Returns, the number of the Insane and Idiotic in Canada is greater in proportion to the population than in the United States.

The total population of the United States is 17,069,453 and the number of the Insane and Idiotic is 17,457 or 1 to 977. The population of United Canada is 1,199,604 the number of Insane and Idiotic is 2,376 or 1 to 504.

We subjoin the following particulars respecting the Insane and Idiotic in Canada taken from the Census :

Lower Canada, population, 693,549.

| | MALES. | FEMALES. | TOTAL. |
|-----------|--------|----------|--------|
| Idiots, | 478 | 472 | 950 |
| Lunatics, | 156 | 152 | 308 |

Upper Canada, pop. 506,055.

| | | | |
|-----------|-----|-----|-----|
| Idiots, | 221 | 178 | 399 |
| Lunatics, | 241 | 478 | 719 |

The foregoing is from the the *May* number of that excellent Journal, "The British and American Journal of the Medical and the Physical Sciences." We notice that the number of the Idiotic in Lower Canada is three times greater than the Insane, while in Upper Canada the number of Insane far exceed the idiotic. How is this to be explained? By the different origin of the population? The Inhabitants of Lower Canada are nearly all of French origin—those of Upper Canada, British.

The insane of Canada are at present very poorly provided for. According to the *Montreal Medical Gazette* there does not exist a single Lunatic Asylum in Canada; the receptacles for them do not deserve the title of Asylums.

We are pleased to be able to add that one is now building at the expense of the Government at Toronto.

Nova Scotia is also destitute of an Asylum for the Insane, but Government Commissioners have recently visited the United States for the purpose of examining Asylums preparatory to building one at Halifax.

INSANITY FROM HUNGER, FEAR AND SUFFERING.

In Captain Fremont's interesting narrative of the second exploring expedition to Oregon, we find the following: "On the 1st of March one of the men named Derosier who had volunteered to bring up Capt. Fremont's horse, had not come back to the camp and uneasiness was felt at his absence. He however made his appearance in the evening. He came in, and sitting down by the fire, began to tell us where he had been. He imagined he had been gone several days, and thought we were still at the camp, where he had left us, and we were pained to see that his mind was deranged. It appeared that he had been lost in the mountain, and hunger and fatigue, joined to weakness of body and fear of perishing in the mountains, had crazed him. The times were severe, when stout men lost their minds from extremity of suffering. The fate of this poor fellow was a melancholy one. On the 23d of March he wandered away, and has not since been heard of."

GRUNDRISS DER SEELENKUNDE: VON DR. K. W. IDELER.

Elementary outline of the Treatment of Insanity by Dr. Ideler, Directing Physician of the department for the Insane at the Hospital Charite, &c., Berlin.

Is there not among the younger members of the Medical Profession some one who will translate the above valuable work? In it the author has embodied a system of Psychology deserving of consideration by all those who are engaged in studying the operation of the mind either in its diseased or healthy state. We agree with Dubois d'Ami-

ens in his recent statement at the French Academy of Medicine, "that the study of mental alienation cannot without inconvenience be separated from psychology," and therefore hope to see works like the above attracting attention.

NOTICES OF INSANITY IN LATE MISCELLANEOUS WORKS.

The "Englishwoman in Egypt," by Mrs. Poole, vol 1, contains an interesting description of the Hospital for the Insane at Cairo, Egypt. In "Letters from Italy," by J. T. Headley, is an account of his visit to the Lunatic Asylum at Genoa. In part second of the "Crescent and the Cross," is an account of an attack of mania produced by attempting to mesmerize a person. The "London Quarterly Review," for Oct. 1844, contains an able Review of the Report of the Metropolitan Commissioners in Lunacy; and in the Westminster Review for March, 1845, is another, written by a gentleman at the head of a large establishment for the Insane in England. In it will be found many valuable suggestions.

NEW WORKS ON INSANITY.

Recently published at Paris, "Du Hachisch et du L'Alienation Mentale, Etudes Psychologiques," Par J. Moreau (de Tours) *Medicine de l'Hospice de Bicetre.*

Dr. Thurnam, Resident Medical Officer at the Retreat, near York, England, has in press "Observations and Essays on the Statistics of Insanity."

Dr. John M. Galt, Superintendent of the Eastern Asylum for the Insane, Williamsburg, Va., is about publishing a work on Insanity. It is now printing in New York.

Dr. GEORGE CHANDLER has resigned the situation of Superintendent of the New Hampshire Asylum for the Insane.

JAMES H. TUKE, member of the Committee of the York Retreat, England, came out in the Great Western, and is visiting the Lunatic Asylums in the United States.

EXCHANGES.

We receive in exchange most of the Medical Journals of this country, and also several literary works and valuable newspapers, for which we feel thankful. In our next we shall endeavor to afford room to particularize all. One good result from the establishment of our Journal is much interesting reading for our patients obtained from our exchanges. Thus the Knickerbocker Magazine, the Columbian Magazine, Biblical Repository, Missionary Herald, Southern Quarterly Review, do us great good in this respect. The Southern Quarterly Review is of a very high order, and we hope to see its circulation extended in the Northern States. Like remarks apply to the Southern Literary Messenger, which we also receive. The general circulation of periodicals of this class published in the different sections of the country, tend to dissipate error and prejudice, and to cement the bonds of union and peace. The high character of the Northern Journals is well known in this region, where they have an extensive circulation.

NOTICE TO EUROPEAN CORRESPONDENTS.

We beg the attention of all those who wish to transmit packages to us from Europe, to the fact, that they can best do so through Wiley & Putnam, New York, and 6 Waterloo Place, London. We now receive Medical Journals, &c., from Europe irregularly and in various ways, but if sent as above requested, they will come safely and regularly, and without much expense.